

THE NATIONAL ARCHIVES

SOLDIER'S CERTIFICATE

No. 809379

VETERAN

Joseph Goss

RANK

Pvt

SERVICE

Co. A 31<sup>st</sup> Wis. Inf.

CAN No.

16697

BUNDLE NO.

44



Adjutant General's Office, Wisconsin—Pension Division

GENERAL AFFIDAVIT FOR ANY PURPOSE

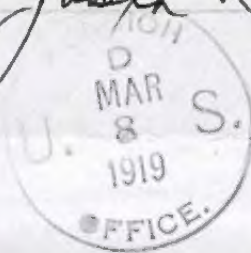
In the matter of the Accrued Pension Claim Margaret F Goss  
No. 809,379 account of Joseph Goss  
late a Private, of Co. "D", 31st Regiment Wis. Inf.  
(Grade)  
State of Wisconsin, County of Milwaukee ss.

On this 15th day of February, A. D. 1919, personally appeared before me  
Joseph L. Goss, a respectable citizen, entitled to credit, who  
being duly sworn, says that he is a resident of Milwaukee, in the County of  
Milwaukee, State of Wisconsin, his postoffice  
address is 1042-76th St., and is 28 years old; he  
declares that he has no interest in this claim. He further says that he

WITNESSES MUST STATE THEIR MEANS OF KNOWLEDGE of facts to which they  
testify, and write their names immediately after their statements, leaving no blank space  
over their signatures.  
When affiant signs by mark two witnesses attest.  
Jurat and Seal of Magistrate on other side.

is the son of the soldier and knows  
that the soldier and claimant were never  
divorced and that they lived together as  
man and wife to the date the soldier  
entered the Soldier's Home which was on Nov.  
29th/1918. The principal reason for the  
soldier entering the home was the claimant's  
inability to care for him due to  
a strained back caused by lifting the  
soldier.

Joseph L. Goss





Subscribed and sworn to before me, this 25<sup>th</sup> day of February, 1919, and I certify that the affiant is a reputable citizen, entitled to credit, and that the foregoing affidavit was read and fully explained to him before he signed the same, including the words erased and the words added; that the certificate of my authority to act as Notary Public is attached hereto  
(Notary Public or Justice of the Peace.) (On file with the Bureau of Pensions)  
and that I have no interest, direct or indirect, in the prosecution of this claim.



Wm. J. Holbrook  
 (Signature)

Notary Public, Milwaukee County, Wisconsin

(Official Character)

My commission expires February 12, 1922

Under Act of Congress, approved July 1, 1890—this affidavit may be executed before a Court of Record or by a Notary Public, whose official signature must be verified by his official seal, and in case he has none, or if executed before a Justice of the Peace, his signature and official character must be certified to by a Clerk of a Court of Record, or by a City or County Clerk, unless such certificate has already been filed with the Commissioner of Pensions. When duly prepared and executed return to the Adjutant General, Madison, Wis., who prosecutes all claims for pensions—for soldiers or their heirs residing in the State, FREE OF CHARGE.

**DUPLICATE OF THIS IS REQUIRED**

This blank is not to be used except in claims in which the Adj. Gen. of Wis. appears as attorney.

**Additional Evidence**

In re Accrued Pension Claim,

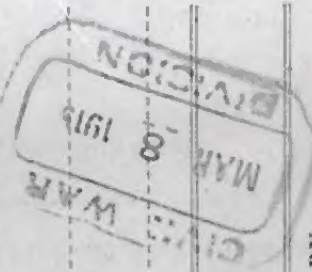
No. 609,379

Margaret J. Goss.

Acc't of Joseph Goss.

Late Co. "I" 1st Reg't

Wis. Inf't.



FILED BY  
**THE ADJUTANT GENERAL**  
 OF WISCONSIN  
**STATE AGENT FOR PENSIONS**

Attorney  
 Madison, Wisconsin

Forwarded MAR 6 - 1919, 191

*Banned*



# Adjutant General's Office, Wisconsin—Pension Division

## GENERAL AFFIDAVIT FOR ANY PURPOSE

In the matter of the Accrued Pension Claim Margaret F. Goss  
 No. 809,379 account of Joseph Goss  
 late a Private, of Co. D, 31st Regiment Wis. Inf.  
 State of Wisconsin, County of Milwaukee ss.

On this 28th day of February, A. D. 1919, personally appeared before me  
Dorothy O'Donnell, a respectable citizen, entitled to credit, who  
 being duly sworn, says that she is a resident of Milwaukee, in the County of  
Milwaukee, State of Wisconsin, her postoffice  
 address is 1525 Cedar St., and is 28 years old; she

declares that she has no interest in this claim.

WITNESSES MUST STATE THEIR MEANS OF KNOWLEDGE of facts to which they testify, and write their names immediately after their statements, leaving no blank space over their signatures.  
 When affiant signs by mark two witnesses attest.  
 Jurat and Seal of Magistrate on other side.

She further says that she has known said soldier and claimant at the time of their marriage, and knows that the soldier and claimant were never divorced, and that they lived together as man and wife to the date the soldier entered the Soldiers' Home Hospital, which was on November 29th A. D. 1918.

She further states that on November 22, 1918 the soldier met with an accident which caused him to become irrational at times and would, at said times, fight with said claimant, and said claimant was unable to keep said soldier in bed - In caring for said soldier claimant sustained a strained back in trying to lift said soldier. These are the reasons claimant sent said soldier to the Soldiers' Hospital. Soldier was never an inmate of the Soldiers' Home up to the time of this accident, at which time he was taken to the Soldiers' Home Hospital.

She further states that the reason for securing witnesses from Pennsylvania is because claimant and soldier resided part of their time in Pennsylvania and part of their time in Wisconsin.

Dorothy O'Donnell





Subscribed and sworn to before me, this 28th day of February, 1919, and I certify that the affiant is a reputable citizen, entitled to credit, and that the foregoing affidavit was read and fully explained to her before she signed the same, including the words hereto ~~attached~~ erased and the words hereto ~~attached~~ added; that the certificate of my authority to act as Notary Public is attached  
(Notary Public or Justice of the Peace.) (On file with the Bureau of Pensions hereto), and that I have no interest, direct or indirect, in the prosecution of this claim.

Charles Johnson  
(Signature)

Notary Public  
(Official Character)

My commission expires Aug 28, 1921

Under Act of Congress, approved July 1, 1890—this affidavit may be executed before a Court of Record or by a Notary Public, whose official signature must be verified by his official seal, and in case he has none, or if executed before a Justice of the Peace, his signature and official character must be certified to by a Clerk of a Court of Record, or by a City or County Clerk, unless such certificate has already been filed with the Commissioner of Pensions. When duly prepared and executed return to the Adjutant General, Madison, Wis., who prosecutes all claims for pensions—for soldiers or their heirs residing in the State, FREE OF CHARGE.

DUPLICATE OF THIS IS REQUIRED

This blank is not to be used except in claims in which the Adj. Gen. of Wis. appears as attorney.

Additional Evidence

In re Assured Pension Claim,

No. 809,379  
809.379

Margaret F. Goss.

Acc't of Joseph Goss.

Late Co. "I" 31st Reg't

Wis. Inf't.

FILED BY

THE ADJUTANT GENERAL

OF WISCONSIN

STATE AGENT FOR PENSIONS

Attorney  
Madison, Wisconsin

Forwarded MAR 6 - 1919, 1919



# Adjutant General's Office, Wisconsin—Pension Division

## GENERAL AFFIDAVIT FOR ANY PURPOSE

In the matter of the Widows Pension Claim Margaret R. Goss  
 No. 809,379 account of Joseph Goss  
 late a Private (Grade), of Co. "i," 31st Regiment Wis. Inft  
 State of Penna, County of Indiana ss.

On this 31 day of January, A. D. 1919 personally appeared before me  
Catharine Corbett, a respectable citizen, entitled to credit, who  
 being duly sworn, says that she is a resident of Black Lick, in the County of  
Indiana, State of Penna, her postoffice  
 address is Black Lick Pa, and is 68 years old; she

declares that she has no interest in this claim. affiant testifies as follows  
that she has known Margaret R. Goss  
since she attained marriageable age and  
knows of her own knowledge that she  
was not married prior to her marriage  
to William Huston who died and  
after his death this claimant did not  
again marry until she married Joseph  
Goss with whom she was living  
as his wife from the time of his death  
affiant further states that she knows of  
her own knowledge that the said  
William Huston died in the year 1908  
January 20-1908 Catharine Corbett

WITNESSES MUST STATE THEIR MEANS OF KNOWLEDGE OF FACTS TO WHICH THEY  
 testify, and write their names immediately after their statements, leaving no blank space  
 over their signatures.  
 When affiant signs by mark two witnesses attest.  
 Jurat and Seal of Magistrate on other side.





Subscribed and sworn to before me, this 31 day of January, 1919, and I certify that the affiant is a reputable citizen, entitled to credit, and that the foregoing affidavit was read and fully explained to him before he signed the same, including the words \_\_\_\_\_ erased and the words \_\_\_\_\_ added; that the certificate of my authority to act as Notary Public <sup>as</sup> \_\_\_\_\_  
(Notary Public or Justice of the Peace.) (On file with the Bureau of Pensions \_\_\_\_\_, and that I have no interest, direct or indirect, in the prosecution of this claim.)

D A Palmer

(Signature)

NOTARY PUBLIC

My Commission Expires March 1, 1920

(Official Character)

Under Act of Congress, approved July 1, 1890—this affidavit may be executed before a Court of Record or by a Notary Public, whose official signature must be verified by his official seal, and in case he has none, or if executed before a Justice of the Peace, his signature and official character must be certified to by a Clerk of a Court of Record, or by a City or County Clerk, unless such certificate has already been filed with the Commissioner of Pensions. When duly prepared and executed return to the Adjutant General, Madison, Wis., who prosecutes all claims for pensions—for soldiers or their heirs residing in the State, FREE OF CHARGE.

DUPLICATE OF THIS IS REQUIRED

This blank is not to be used except in claims in which the Adj. Gen. of Wis. appears as attorney.

Additional Evidence

In re Accrued Pension Claim,

No. 809 379

Margaret R. Goss,

Acc't of Joseph Goss.

Late Co. "I," 51 Reg't

Wis. Inf.

FILED BY  
THE ADJUTANT GENERAL  
OF WISCONSIN  
STATE AGENT FOR PENSIONS

Attorney  
Madison, Wisconsin

Forwarded FEB 6 - 1919, 191



Adjutant General's Office, Wisconsin—Pension Division

GENERAL AFFIDAVIT FOR ANY PURPOSE

In the matter of the Widows Original Pension Claim Margaret R. Goss  
No. 809,372 account of Joseph Goss  
(Here give Soldier's Name.)  
late a Private, of Co. "I," 31st Regiment Wis. Inf.  
(Grade)  
State of Pennsylvania, County of Westmoreland ss.

On this 28th day of January, A. D. 1919, personally appeared before me  
J. W. Barnett, a respectable citizen, entitled to credit, who  
being duly sworn, says that he is a resident of Derry Township, in the County of  
Westmoreland, State of Pennsylvania, his postoffice  
address is Hillside, Westmoreland Co., Pa., and is 79 years old; he  
declares that he has no interest in this claim. Affiant testifies as follows:—

WITNESSES MUST STATE THEIR MEANS OF KNOWLEDGE of facts to which they  
testify, and write their names immediately after their statements, leaving no blank space  
over their signatures.  
When affiant signs by mark two witnesses attest.  
Jurat and Seal of Magistrate on other side.

That he was well acquainted with the claimant in this case  
since she attained marriageable age up until the year 1907 and  
that he knows of his own knowledge that she was not married  
prior to her marriage to William Huston, who died in the year  
1907. For several years before her marriage to William Huston  
she was a member of my household and for several years after  
her marriage to Huston she lived within a couple of miles from  
my home.

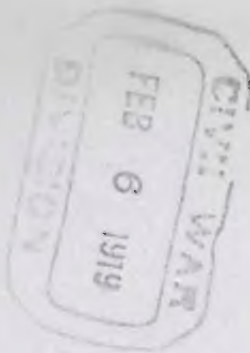
Affiant further states that after the death of said William  
Huston that Mrs. Huston removed from my neighborhood and that  
he heard that she had married Joseph Goss but has no personal  
knowledge of the same.

Attest.  
W. A. Kunkle

J. W. Barnett







Subscribed and sworn to before me, this 28th day of January, 1919, and I certify that

the affiant is a reputable citizen, entitled to credit, and that the foregoing

affidavit was read and fully explained to him before he signed

the same, including the words ----- erased

and the words ----- added; that the certificate

of my authority to act as Notary Public is attached hereto

(Notary Public or Justice of the Peace.) (On file with the Bureau of Pensions

-----, and that I have no interest, direct or in-  
or attached hereto as the case may be.)

direct, in the prosecution of this claim.

W.A. Kunkle

(Signature)

Notary Public

(Official Character)

My Commission expires May 14, 1919.

Under Act of Congress, approved July 1, 1890—this affidavit may be executed before a Court of Record or by a Notary Public, whose official signature must be verified by his official seal, and in case he has none, or if executed before a Justice of the Peace, his signature and official character must be certified to by a Clerk of a Court of Record, or by a City or County Clerk, unless such certificate has already been filed with the Commissioner of Pensions. When duly prepared and executed return to the Adjutant General, Madison, Wis., who prosecutes all claims for pensions—for soldiers or their heirs residing in the State, FREE OF CHARGE.

DUPLICATE OF THIS IS REQUIRED

This blank is not to be used except in claims in which the Adj. Gen. of Wis. appears as attorney.

Additional Evidence

In re Wid. Orig. Pension Claim,

No. 809,379--

Margaret R. Goss,

Acc't of Joseph Goss.

Late Co. "I," 31st Reg't

Wia. Inf't

FILED BY

THE ADJUTANT GENERAL

OF WISCONSIN

STATE AGENT FOR PENSIONS

Attorney

Madison, Wisconsin

Forwarded FEB 3 - 1919, 191



# Adjutant General's Office, Wisconsin—Pension Division

## GENERAL AFFIDAVIT FOR ANY PURPOSE

In the matter of the Wid. Accrued Pension Claim Margaret R. Goss,  
No. 809,379 account of Joseph Goss,  
(Here give Soldier's Name.)  
late a 31st Regiment Wis. Inft  
(Grade)  
State of Wisconsin, County of Dane, ss.  
On this 20th day of January, A. D. 1919, personally appeared before me  
Mary Devine, a respectable citizen, entitled to credit, who  
being duly sworn, says that she is a resident of Madison, in the County of  
Dane, State of Wisconsin, her postoffice  
address is 202 North Park Street Madison, Wis., and is 58 years old; she  
declares that she has no interest in this claim. Affiant testifies as follows:-

That she has been well acquainted with the soldier  
Joseph Goss for more than fifty years, and since he attained  
Marriageable age, and to the best of her knowledge believes  
the said soldier was not married prior to his Marriage to  
Annie Goss, who died.

Affiant further stated that she lived neighbor to the  
said Joseph Goss, at the period of time above stated, and  
had the said soldier been previously married before his  
marriage to the said Annie Goss, this affiant would have  
known of it.

Affiant declares the above statements are true.

WITNESSES MUST STATE THEIR MEANS OF KNOWLEDGE of facts to which they  
testify, and write their names immediately after their statements, leaving no blank space  
over their signatures.  
When affiant signs by mark two witnesses attest.  
Jurat and Seal of Magistrate on other side.



*Mary Devine*



Subscribed and sworn to before me, this 20 day of January, 1919, and I certify that the affiant is a reputable citizen, entitled to credit, and that the foregoing affidavit was read and fully explained to her before she signed the same, including the words \_\_\_\_\_ erased and the words \_\_\_\_\_ added; that the certificate of my authority to act as \_\_\_\_\_ is \_\_\_\_\_  
(Notary Public or Justice of the Peace.) (On file with the Bureau of Pensions)

\_\_\_\_\_ and that I have no interest, direct or indirect, in the prosecution of this claim.

M. J. Ransom  
Notary Public of Wisconsin  
Madison, Wis.

My Commission Expires October 8, 1922

Under Act of Congress, approved July 1, 1890—this affidavit may be executed before a Court of Record or by a Notary Public, whose official signature must be verified by his official seal, and in case he has none, or if executed before a Justice of the Peace, his signature and official character must be certified to by a Clerk of a Court of Record, or by a City or County Clerk, unless such certificate has already been filed with the Commissioner of Pensions. When duly prepared and executed return to the Adjutant General, Madison, Wis., who prosecutes all claims for pensions—for soldiers or their heirs residing in the State, FREE OF CHARGE.

**DUPLICATE OF THIS IS REQUIRED**

This blank is not to be used except in claims in which the Adj. Gen. of Wis. appears as attorney.

**Additional Evidence**

In re Wid. Orig. Pension Claim,

No. 809,379.

Margaret R. Goss,

Acc't of Joseph Goss.

Late Co. "I", 51st Reg't

Wis. Inf.

FILED BY

**THE ADJUTANT GENERAL**

OF WISCONSIN

STATE AGENT FOR PENSIONS

Attorney

Madison, Wisconsin

**FILED 3-1919**

Forwarded \_\_\_\_\_, 191\_\_\_\_\_



# Adjutant General's Office, Wisconsin—Pension Division

## GENERAL AFFIDAVIT FOR ANY PURPOSE

In the matter of the Wid. Accrued Pension Claim Margaret R. Goss,  
No. 809,379 account of Joseph Goss,  
(Here give Soldier's Name.)  
late a \_\_\_\_\_, of Co. "I," 31st Regiment Wis. Inf.  
(Grade)  
State of Wisconsin, \_\_\_\_\_, County of Dane, \_\_\_\_\_ ss.

On this 20th day of January, A. D. 1919 personally appeared before me  
Patrick Lynch, \_\_\_\_\_, a respectable citizen, entitled to credit, who  
being duly sworn, says that he is a resident of Madison, \_\_\_\_\_, in the County of  
Dane, \_\_\_\_\_, State of Wisconsin, \_\_\_\_\_, his postoffice  
address is 417 West Mifflin Street, Madison, \_\_\_\_\_, and is 66 years old; he  
declares that he has no interest in this claim. Affiant testifies as follows:-

WITNESSES MUST STATE THEIR MEANS OF KNOWLEDGE of facts to which they  
testify, and write their names immediately after their statements, leaving no blank space  
over their signatures.  
When affiant signs by mark two witnesses attest.  
Jurat and Seal of Magistrate on other side.

That he has been well acquainted with the soldier, Joseph Goss, since, and before he attained marriageable age, and to the best of his knowledge believes the said soldier was not married prior to his marriage to Annae Goss who died.

Affiant further states that the soldier above named and this affiant were boys together, and while he cannot of his own knowledge positively state that there was not a prior marriage of the soldier, yet he believes that had there been a previous marriage this affiant would have known of it.

Affiant declares and affirms the above statements are true.

Patrick Lynch



Subscribed and sworn to before me, this 20 day of January, 1919, and I certify that  
the affiant is a reputable citizen, entitled to credit, and that the foregoing  
affidavit was read and fully explained to him before ---- he signed  
the same, including the words ----- erased  
and the words ----- added; that the certificate  
of my authority to act as ----- is -----  
(Notary Public or Justice of the Peace.) (On file with the Bureau of Pensions  
-----, and that I have no interest, direct or in-  
or attached hereto as the case may be.)  
direct, in the prosecution of this claim.

*M. J. Ransom*  
(Signature)

Notary Public of Wisconsin  
Madison, Wis.

My Commission Expires October 8, 1922

Under Act of Congress, approved July 1, 1890—this affidavit may be executed before a Court of Record or by a Notary Public, whose official signature must be verified by his official seal, and in case he has none, or if executed before a Justice of the Peace, his signature and official character must be certified to by a Clerk of a Court of Record, or by a City or County Clerk, unless such certificate has already been filed with the Commissioner of Pensions. When duly prepared and executed return to the Adjutant General, Madison, Wis., who prosecutes all claims for pensions—for soldiers or their heirs residing in the State, FREE OF CHARGE.

DUPLICATE OF THIS IS REQUIRED

This blank is not to be used except in claims in which the Adj. Gen. of Wis. appears as attorney.

Additional Evidence

In re ----- Wid. Orig. ----- Pension Claim.

----- No 09,379 -----

Margaret R. Goss,

Acc't of ----- Joseph Goss.

Late ----- Co. "I," 31st Reg't

Wis. Inf't -----

FILED BY

THE ADJUTANT GENERAL

OF WISCONSIN

STATE AGENT FOR PENSIONS

Attorney

Madison, Wisconsin

Forwarded ----- FEB 8 - 1919 -----, 191-----



# Adjutant General's Office, Wisconsin---Pension Division

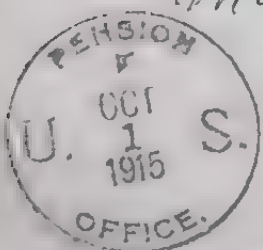
## GENERAL AFFIDAVIT FOR ANY PURPOSE

In the matter of the Live Pension Claim  
 No. 809,377 account of Joseph Gore  
 (Here give soldier's name.)  
 late a Priv of Co. "A," 31<sup>st</sup> Regiment Wis Inf  
 (Grade)  
 State of Wisconsin, County of Dane ss.  
 On this 24<sup>th</sup> day of September, A. D. 1915, personally appeared before me  
Joseph Gore, a respectable citizen, entitled to credit, who  
 being duly sworn, says that he is a residents of Madison, in the County of  
Dane, State of Wisconsin, his postoffice  
 address is 915 West Dayton, and is 70 years old; he  
 declares that he has no interest in this claim.

WITNESSES MUST STATE THEIR MEANS OF KNOWLEDGE of facts to which they testify, and write their names immediately after their statements, leaving no blank space over their signatures.  
 When affiant signs by mark two witnesses attest.  
 Jurat and Seal of Magistrate on other side.

Affiant testifies as follows  
 That he is the claimant in the above  
 cited claim, and that he is 70 years of age,  
 having been born June 15, 1845, as he  
 has always been told by his parents, and  
 always considered said date to be correct.  
 Affiant further states that there  
 is no Bible or church record showing  
 the date of his birth. To his knowledge  
 having never seen or heard of any.  
 Affiant states further that when he  
 he enlisted his father signed his  
 enlistment papers and gave soldier age as  
 18 years. Said claimant enlisted Dec 16-1862  
 and was 17 years of age June 15, previous.  
 instead of 18, as given by his father  
 was in his 18<sup>th</sup> year but not 18 until  
 June 15 following, or 70 years June 15, 1915.  
 Affiant further alleges that he with  
 his Parents came to Madison Wis  
 in the year 1848, and lived in this  
 city with his parents until he enlisted  
 in the Army.  
 His Father's name was Michael & his  
 mother's name was Mary. Had one brother  
 named Edward and a sister named  
 Mary. but all are dead.  
 Affiant affirms the above is true.

Joseph Gore





Subscribed and sworn to before me, this 29 day of September, 1913, and I certify that the affiant is a reputable citizen, entitled to credit, and that the foregoing affidavit was read and fully explained to him before ----- he signed the same, including the words ----- erased and the words ----- added; that the certificate of my authority to act as ----- is -----  
(Notary Public or Justice of the Peace.) (On file with the Bureau of Pensions -----, and that I have no interest, direct or indirect, in or attached hereto, as the case may be.)  
the prosecution of this claim.

M. J. Ramsom  
(Signature)  
-----  
(Official Character)

Under Act of Congress, approved July 1, 1890--this affidavit may be executed before a Court of Record or by a Notary Public, whose official signature must be verified by his official seal, and in case he has none, or if executed before a Justice of the Peace, his signature and official character must be certified to by a Clerk of a Court of Record, or by a City or County Clerk, unless such certificate has already been filed with the Commissioner of Pensions. When duly prepared and executed return to the Adjutant General, Madison, Wis., who prosecutes all claims for pensions--for soldiers or their heirs residing in the State, FREE OF CHARGE.

**DUPLICATE OF THIS IS REQUIRED**

This blank is not to be used except in claims in which the Adj. Gen. of Wis. appears as attorney.

**Additional Evidence**

In re Enc Pension Claim,  
No. 509,379  
Joseph H. Goss  
Acc't of Sarah  
Late Pr Co. "L," 31<sup>st</sup> Reg't  
Wis Emp

FILED BY  
**THE ADJUTANT GENERAL**

OF WISCONSIN

**STATE AGENT FOR PENSIONS**

**ATTORNEY**

Madison, Wisconsin

Forwarded 9-29 1913



August 21, 1947

8BAAE

SC 809 379  
GOSS, Joseph

Honorable Harve Tibbott  
House of Representatives  
Washington 25, D. C.

Dear Mr. Tibbott:

This will acknowledge the receipt of your letter dated August 1, 1947, regarding the entitlement of Mrs. Margaret R. Goss, Black Lick, Pennsylvania, to death pension as widow of the above named veteran who served during the Civil War.

Under presently existing laws, in order for the widow of a Civil War veteran to have entitlement to death pension, it must be shown among other things that the veteran's death was due to his service or that the marriage took place prior to June 27, 1905 or if subsequent thereto, that the widow was married to the veteran ten or more years prior to his death and lived with him continuously from the date of marriage to the date of death, except where there was a separation which was due to misconduct of or procured by the veteran without the fault of the widow.

Inasmuch as information of record shows that Mrs. Goss was married to the veteran November 8, 1912 and that the veteran's death occurred December 3, 1918, less than 10 years prior to his death, Mrs. Goss could have no title to pension unless it would be established that his death was the result of his service and it does not appear probable that this fact could be shown since his death did not occur until more than fifty years subsequent to his discharge.

Very truly yours,

R. J. HINTON  
Director  
Dependents and Beneficiaries Claims Service



HARVE TIBBOTT  
26TH DIST. PENNSYLVANIA

1431 NEW HOUSE OFFICE BUILDING

COMMITTEE:  
APPROPRIATIONS

Congress of the United States  
House of Representatives

Washington, D. C.

August 1, 1947

no XC #  
SC 809379.

8-8-47

Htgco.

Harve Tibbott







Pa ✓

Bill No. 1747 ✓ Code No. 2 ✓ Widow? Yes ✓

Name Margaret R. Goss ✓ XC  
WC  
SC 107-379 ✓

Date of birth 1861-12-22 ✓ Age 79 ✓ Date of marriage to veteran 1911 ✓

Rate being paid 2000 ✓ Rate proposed by bill \$3000 ✓

Is widow alive? Yes (presently) ✓ If not, state date of death \_\_\_\_\_

Present value of property, if shown \_\_\_\_\_

Present income per year, if shown \_\_\_\_\_

Do facts in committee report agree with those in file? Yes ✓  
If not, in what respect do they differ? \_\_\_\_\_

Is pension being paid to widow? Yes ✓ Public or private act? \_\_\_\_\_  
If being paid under private act, is there title under public law? \_\_\_\_\_  
If not entitled under public law, why not? \_\_\_\_\_

*No evidence to show married before 6-1-75  
No evidence to show that veteran died before  
due to his service.*

Is widow entitled to an increase under public law? \_\_\_\_\_

W. B. G. Goss (Adj.) Date 4-8-41

J. L. Caton (Atty. Rev.) Date 4-11-41

*Not a widow*



H. R. 1747. Margaret R. Goss, aged 80 years, whose post-office address is box 406, Homer City, Pa., is the widow of Joseph Goss, late a private, Company I, Thirty-first Regiment Wisconsin Infantry, from December 16, 1862, to July 8, 1865, who was a pensioner under certificate No. 809379 at the rate of \$40 per month, and who died December 3, 1918.

Applicant and the late soldier were married November 8, 1912, and the evidence filed in support of the bill indicates she is his legal widow. She has no title to pension as such under existing laws as she did not marry him prior to June 27, 1905.

The medical evidence presented indicates that she requires the aid and attendance of another person by reason of disease of heart including decompensation, dizziness, and edema of ankles.

She has no means or property or income from any source except old-age assistance of \$15 per month. No one is legally bound to her support.

It is recommended that her name be placed on the pension roll at the rate of \$30 per month.



6/72

3-1647.

# Act of Feb. 6, 1907.

Cert. 809379-

Name, Joseph Goss

Application filed June 21, 1907  
Service,

I 31. Was Exp  
Nov 21/07 Letter to Hon  
Chas. Voss ETC

Sec DC 174279. NC 644622  
Leherer Servant

Le & D. 12ny Cal ETC  
6/22/20



1944

RECEIVED  
109 92 100  
24-21



Book

[3-216 a.]

Ex'r.

No. 911461

Act of June 27, 1890.

P.O.

Service:

Enlisted:

18

Discharged:

18

Application filed:

1890

Alleges:

Any other Claim filed:

Dec. 174279 W.C. 644 622

Numerical No.

EPC.  
6, 2 1/2

Attorney:

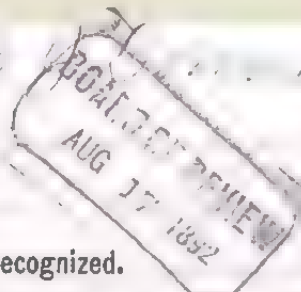
P. O.

Recognized.

Contract.

Cert. of Dis. Searched for

18





IND.

ILL.

IOWA.

WIS.

MINN.

NEBR.

KANS.

NEV.

COLO.

CAL.

OREGON.

IND. TY.

N. MEX.

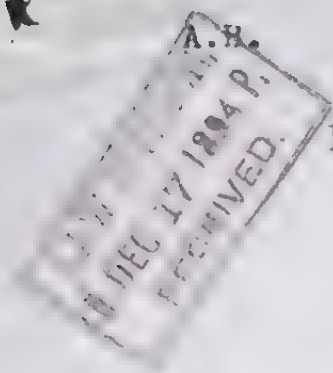
DAKOTA.

WASH.

UTAH.

Oct. 16 7/11  
Dec. 19 91, date of contracting  
Cataract and pile.

Wich. 3, 7 7, testimony as to  
Cataract and pile.



DEPARTMENT OF THE INTERIOR,  
WASHINGTON,

DEC 8 1894

*Handwritten signatures and initials, including 'J. H. S.' and 'E. H. S.'*

Docket No.22,350.	)	
	)	
Appeal in the claim of	)	
	)	
Joseph Goss.	)	Rejection affirmed.
	)	
Co. I, 31st Wis. Vol. Inf.)	)	
	)	
Cert. No.809,379.	)	

-----

Claim under the general law. Original.

Paralysis of left arm and side, result of a fall  
alleged.

Rejected on the ground of no disability.

-----




The Commissioner of Pensions,

Sir:

On Nov. 20th, 1875, the claimant filed a declaration for pension under the general law; he alleged paralysis of left arm and side, result of an injury by falling while in the service. His claim was rejected December 29th, 1876, on the ground of "no disability". Appeal was filed October 17th, 1894. The claimant was examined by a medical board Nov. 1st, 1874, and again October 28th, 1891. In both certificates of medical examinations it is stated that there is no paralysis of left arm or side. There is other evidence in the case, but it is not sufficient to establish the claim.

Action affirmed.

Very respectfully,

  
Assistant Secretary.

OFFICE OF  
CHAS. J. DONNELLY & CO.,  
CLAIM ATTORNEYS,  
504 E STREET, NORTHWEST,

Western Division.

Washington, D. C., Oct. 12, 1894.

Inv. Clf. No. 809,379.

Joseph Goss,

Co. "I," 31st Wis. Vols.

Hon. Secretary of the Interior,

Washington, D. C.

Sir:-

In the matter of above described claim for pension, under the old or general laws, we have the honor to appeal from the action of the Pension Bureau in rejecting said claim upon the ground that claimant has not been disabled in a pensionable degree since his discharge by reason of paralysis of left arm and side.

In his declaration the claimant alleged paralysis of left arm and side, result of a fall, at Atlanta, Ga., on or about August 12, 1864.

In the claim there has been filed the affidavit of Dr. Ovis, who testifies that claimant is afflicted with a general weakened condition of the whole of the left side as a result of partial paralysis; the power of the left hand is not one-half normal, and a halting gait from dragging of left limb; exaggerated reflex in left limb.

We contend that the testimony of this physician clearly shows a pensionable degree of disability by reason of the disability for which pension is claimed, and that the claim should be



-2-

allowed, if otherwise complete.

Very respectfully,

*Chas J. Donnelly & Co.*  
Attorneys for claimant.

Law Division, Sec. A.

APPEAL CASE.

---

Department of the Interior,

BUREAU OF PENSIONS,

*Dec 19* .., 189*4*

Chief of *West* Division:

*The papers of this claim are respectfully returned to you with attention called to the accompanying decision of the Hon. Secretary of the Interior.*

*Frank E. Anderson,*

.....L.....

*Chief Law Division.*



LAW DIVISION,  
B. OCT 16 39 P.  
RECEIVED.

22350

Appeal received *Oct 16 1894*,

Dated \_\_\_\_\_, 189...

*Chas. J. Donnelly & Co.,  
City*

From \_\_\_\_\_

SUBJECT:

Appeal in *the* pension claim  
No. *@ 509.379*,

*Joseph Goss,  
I 31 Wis.*

[OVER.]

1-383.

Docket No. *22350*, 189

Department of the Interior,

*OCT 17 1894*

, 189...

Respectfully referred to the Com-  
missioner of Pensions for report.

Assistant Secretary.

Report received \_\_\_\_\_, 189...  
and filed herewith.

FINAL ACTION. *N.A.B.*

DEC 8 1894 Rejection Affirmed

1113A b-5 m

Section I.

Civil War Division

Inv.Ctf.809,379

Joseph Goss

Co.I, 51 Wisconsin Inf.

## DEPARTMENT OF THE INTERIOR

## BUREAU OF PENSIONS

WASHINGTON

August 17, 1915.

Mr. Joseph Goss,

482 Lurray Avenue,

Milwaukee, Wisconsin.

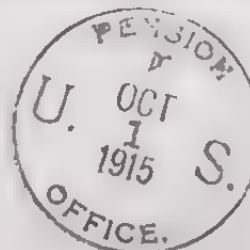
Sir:

Your claim for pension under the Act of May 11, 1912 requires a verified copy of the public, church or family record showing the date of your birth.

If there is no public or church record and a copy of the family record be furnished, the officer certifying to the same should state in what year the Bible, or other book in which the record appears, was printed; whether the record bears any marks of erasure or alteration and whether from the appearance of the writing, he believes the entries to have been made about the dates given.

If you are unable to furnish the required proof of age you should so state, under oath, and give the reasons why.

You should state without oath the name of the town or township, county and state in which you resided during





the summers of 1850 and 1860; with whom you then lived; the full names of your parents, brothers and sisters living in June 1850 and June 1860, and, if you lived in a city, you should state your street, ward and between what streets.

Very respectfully,

*E. C. Tieman*

Acting Commissioner.

I.C.809,379



Aug. 11 '13  
61

# FILES SLIP.

Ch.

No. 809379

Joseph Barr

31" W. S. Inf

EXAMINER.



*John*  
*As of Rec. Oct. 7, 1915*  
*Geo. W. (3-12)* 5/15  
**ADMITTED FILES.**

Certificate No. 517377

Series \_\_\_\_\_

Pensioner \_\_\_\_\_

Soldier Joseph Brown

Service 1862-1865

AD - MARCH 4, 1910

Drawn by CIVIL WAR.

for \_\_\_\_\_

\_\_\_\_\_ Division.

Charged \_\_\_\_\_, 191

to \_\_\_\_\_

on slip signed \_\_\_\_\_

**FILES**

SECTION 2 3 1847.

Wheller

Act of May 11, 1912.

Cert. 809379

Name, \_

Application filed

, 191\_

Service, \_

A to ret. for age.

11/24/12.

M. L. M.

Aug 17, 1915. To cit for ev. Having  
date of birth & census data for 1910  
and to ag.



Dec. 29, 1900. To the  
 Credit Bank of Wisconsin  
 credit note date and  
 cause of eye. under  
 Act June 27/90. A.H.  
 the Sen. J. H. Davidson,  
 A.H.

(3-230.)

INVALID. (Series \_\_\_\_\_)

Cert. No. **809379**

Name, *Joseph Ross*

Rank, *1st*; Service, *O. S. 31 Mos. 1897*

Agency, { Original Roll, *Wisconsin*

Transf'd \_\_\_\_\_, 18\_\_\_\_, to \_\_\_\_\_

" \_\_\_\_\_, 18\_\_\_\_, to \_\_\_\_\_

Issued, *Sept 14*, 1897

Mailed *11*, 1897

Rate and Period, \$ *12*, from *July 19*, 1897

Action complete  
 by Board of Revision

Deductions:

Disability *Varicella virus of both  
 naso-pharyngeal catarrh, & d.  
 of rectum.*

Issued, *June 13*, 1898

Mailed *11*, 1898

Rate and Period, \$ *8.00*, from *Apr. 4*, 1898

Act of Jun \_\_\_\_\_

Deductions:

Disability *Partial inability to earn  
 support by manual labor.*

Class. *Orig*  
 Issue *10*  
 Entered *1*  
 No atty *1*  
 Class. *Reit.*  
 Issue *1*  
 Entered *1*

Issued, *Nov. 16*, 1897

Mailed *23*, 1897

Rate and Period, \$ *10*, from *Aug. 18*, 1897

Deductions:

Disability: *by manual labor.*

Issued, *Nov. 13*, 1897

Mailed *NOV 14*, 1897

Rate and Period, \$ *12*, from *June 26*, 1897

Deductions:

Disability:

INDORSEMENTS

*Oct 22 94 Case to be  
 Dec 8. 94 Action ad  
 " 19 " atty inf.  
 Mar 9/95. Case to be to executor  
 Nov. 3/98. Right Division  
 in action warranted in new  
 law firm.*

STATE OF WISCONSIN  
THE ADJUTANT GENERAL'S OFFICE  
MADISON

February  
Sixth  
1919.

41.7  
Commissioner of Pensions

Washington D. C.

Dear Sir:-

In the claim of Margaret R. Goss, # 809,379  
widow of Joseph Goss, I have discovered that I executed the de-  
claration on a blank application for original pension, when it  
should have been for the accrued pension due the soldier.

They were married November 8, 1912. Do I need to make another  
another application, on a blank for the accrued pension?

Am enclosing more evidence this day which I believe ~~is~~  
with the evidence previously filed will be sufficient to estab-  
lish the claim for the accrued pension.

Very respectfully.

W. J. Rawson  
Pension Clerk.

*H. R. O. Miller*  
EX *INVALID.*

*21441*

Acts of July 14, 1862, and March 3, 1873.  
*150* **REJECTED.**

*Nov. 18, 89. Atty (C. J. D.) date  
+ ground of Rejection*

P. O. *Joseph Giff Dundee*  
*248 Jackson St.*  
*Chicago Ill*  
Service: *Aug. 31 1862*

Enlisted: *Dec. 16*, 18*62*  
Discharged: *July 8*, 18*65*

Application filed: *Nov. 25*, 18*75*  
*Lu. D. C. 174279*  
*N.C. 644,622*

Alleges: *Charles Deranton*  
*C + D. 12. 27 Cal* *SPC*  
*6.24/10*

Re-enlisted:

Attorney: *Chas. J. Donnelly City*  
*Chicago Ill*  
P. O. *Chicago Ill*

Recognized. Contract  
Cert. of Dis. Searched for *December 18*



Civil War Division  
Inv. Ctf. 809,379  
Margaret F. Goss  
Joseph Goss  
Co. I 31 Wis. Inf.

JWD:LLC



October 7, 1919.

The Adjutant General of Wisconsin,  
Madison,  
Wisconsin.

Sir:

In reply to your inquiry you are advised that the claim of the above named widow for the accrued pension due the soldier at the date of his death was allowed April 26, 1919.

Very respectfully,

SALTZGARIK  
Commissioner.

With any reply  
refer to

W.C.N.

August 25, 1919.

Mrs. Margaret R. Goss,  
Coral, Pennsylvania.

Madam:

Referring to the pension case of Joseph Goss, Ctf. No. 809,349, and in response to your letter dated August 5, 1919, requesting the return of your marriage certificate filed in the case, in order to obtain the accrued pension due the soldier at the date of his death, inclosed is the marriage certificate of Joseph F. Goss and Margaret R. Huston.

Respectfully,

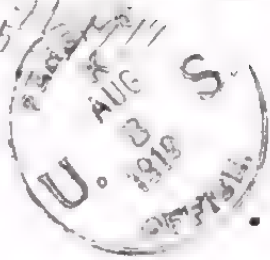
Commissioner.

W.C.N./mek

Corral Pa

Aug 5/1919

Honorable Clerk,

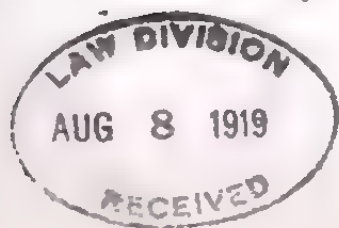


Dear Sir

Please return marriage  
certificate of Joseph Goss  
to Margaret R. Houston  
as was forwarded to prove  
claim of deceased person  
No. 859,379 Invalid's Intestates  
and oblige

Margaret R Goss.

Corral Pa





R1133

~~R1121~~ 8-14-19

~~8-9-19~~

In any reply refer to  
Civil War Division,  
I.C.No.809,379,  
Joseph Goss,  
Co.I,31st Wis.Inf.  
Margaret R. Goss, widow.

NRB

February 20,1919.

Mrs. Margaret R. Goss,

1042 - 36th Street,

Milwaukee, Wisconsin.

Sir:

In your claim for the accrued pension due in the case of the above named soldier you should furnish the sworn statement of one person, for use with the testimony on file of Catharine Cribbs, who knew the claimant from the date of death of her former husband, W. M. Huston, in 1908, to the date of her marriage to the soldier Joseph Goss, showing whether she remarried during that period; also, the sworn statements of two persons who knew the soldier and the claimant and lived in the vicinity where they resided from the date of their marriage to the date of his death, showing whether they were ever divorced and whether they lived together as man and wife to the date the soldier entered the Soldier's Home, giving the date of his entrance to the Home and the reason therefor. The testimony on file of Catharine Cribbs is not sufficient on the question of cohabitation, for the reason that it appears that she resides in Pennsylvania while the soldier resided in Wisconsin.

The statement of H. T. Stemper, filed Feb. 8, 1919, is not sufficient on the question of marriage, for the reason that it is not sworn to, nor does it bear the seal of the church. You should show the date of your marriage to the soldier by a certified copy of the public or church record, or by the sworn statements of two persons who were present at the ceremony.

No affidavit can be considered satisfactory that fails to show the age and postoffice address of the witness and how he knows the facts stated.

Do not fail to endorse each paper filed with the soldier's name and service and the number of the claim.

Very respectfully,

J. W. SALTZGABER

Commissioner

Section I.  
Civil War Division  
Inv. Ctf. 609,579  
Joseph Goss  
Co. I, 31 Wisconsin Inf.

August 17, 1915.

Mr. Joseph Goss,  
482 Murray Avenue,  
Milwaukee, Wisconsin.

Sir:

Your claim for pension under the Act of May 11, 1912 requires a verified copy of the public, church or family record showing the date of your birth.

If there is no public or church record and a copy of the family record be furnished, the officer certifying to the same should state in what year the Bible, or other book in which the record appears, was printed; whether the record bears any marks of erasure or alteration and whether from the appearance of the writing, he believes the entries to have been made about the dates given.

If you are unable to furnish the required proof of age you should so state, under oath, and give the reasons why.

You should state without oath the name of the town or township, county and state in which you resided during



the summers of 1850 and 1860; with whom you then lived; the full names of your parents, brothers and sisters living in June 1850 and June 1860, and, if you lived in a city, you should state your street, ward and between what streets.

Very respectfully,

Acting Commissioner.

12E1009,379

10-30-12

October 31, 1912.

J. H. Goss,  
433 Murray Avenue,  
Milwaukee, Wisconsin.

Sir:

Replying to your communication of October 29, 1912, received the 30th instant, in which you refer to your claim under Certificate Number 809379 for service in Company I, 31st Volunteer Infantry, and enclose a certified copy of articles of separation between yourself and your wife, Sarah Myra Goss, on file in the office of the Clerk of the Circuit Court in and for Fond du Lac County, Wisconsin, in anticipation of a claim by her for a part of your pension, your letter and enclosure are herewith returned and you are advised that a careful search of the records of this Bureau fails to show any claim filed by or on behalf of your said wife for one-half your pension, under the Act of March 3, 1899, a copy of which is herewith enclosed for your further information.

Should such application be hereafter filed, you will be duly notified thereof and afforded ample opportunity to file such evidence in defense of your pension as you may deem necessary.

Very respectfully,

The enclosures.

Acting Commissioner.

January 1, 1911.

C. J. Smith, Esq.,

House of Representatives,

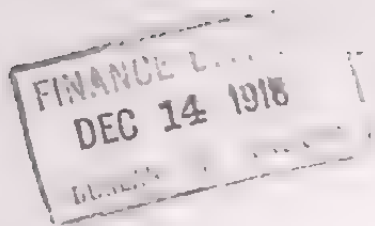
Washington, D. C.:-

I have the honor to acknowledge the receipt of your letter of the 1st instant, relating to the proposed bill, H. R. 10000, for the purpose of amending the Act of March 3, 1879, entitled "An Act to provide for the collection of duties on goods imported from foreign countries," and to inform you that the same has been referred to the Committee on Finance, and that the Committee will report thereon at an early day. I am, Sir, very respectfully,  
Yours very truly,  
C. J. Smith.

C. J. Smith, Esq.,

Washington, D. C.





CET



Milwaukee, Wis

Dec. 11, 1918.

Commissioner of Pensions,  
Washington D. C.

Sir:-

My husband, Joseph Goss, late  
Co. I, 31<sup>st</sup> Wis. Inf. Certificate 809,379,  
died at Soldiers' Home, Milwaukee,  
Wis Dec 3 1918. His Certificate  
was returned to you by the  
Governor of the Home the same  
day with notice of his death  
As the widow of Joseph Goss  
I hereby apply for the accrued  
pension due.

Respectfully yours  
Margaret R. Goss

" 1042 26<sup>th</sup> St. Apt. 3.



Sail. 10.18 10.3/18 ✓

10.18 10.3/18 ✓

10.18 10.3/18 ✓

10.18 10.3/18 ✓

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10.18 10.3/18 ✓

10.18 10.3/18 ✓



Under Act of June 27, 1890.

(3-217a.)

INCREASE.

Claim to

No.

P. O.,

County,

State,

Application filed

State Service,

Fond du Lac, Wis.

June 11/1900

Ar. Ex. to eff.

Adm. Genl of Wis. Mfg.

Nov. 8/90. Recd. & put on

thru Hon. S. H. Davidson & Adm.

of Wis. H. A. E.

Disability,

Attorney,

P. O.,

County,

State,

(186-100m.)

(3-217.)

INCREASE.

Claim to

No. 809.379

Joseph Gross

P. O., Campbellport

County, Fond du Lac

State, Wis.

Application filed Jan 25, 1897

State Service, J. 31- Miss. Dy

Locality, Fond du Lac

Jul 27/97. " Co, Wis.

See No 3-173 to claimant

Oct-7, 1897, Genl. Status

Re-claimant by request

of Han J. H. Davidson

Disability.

Attorney, The Adj. Genl. of Wis.

P. O., Madison

County, State, Wis.

(Order 10 — 100 M.)

DAH.

R

Inspector 7-16-97

Under Act of June 27, 1890  
(3-217)

INCREASE.

Claim to .....

No. 892.379

P. O., Stearns

County, Stearns

State, Minn.

Application filed, Aug. 18. 97

State Service, J. B. 11. 97

Recd.

Disability, .....

Attorney, Chas. Borden

P. O., Madison

County, ....., State, Minn.

(Order — 100 M.)

filed  
12/9/97

✓



County, of and of the State, State,

Act May 11, 1912, and  
" June 10, 1918,

## ACCRUED PENSION

1 Brief

Class Invalid

Pensioner Joseph Goss,

Date of death December 3, 1918, 1 Certificate has been filed.

Claimant Margaret R. Goss, widow,

Coral,

Indiana County,

Pennsylvania,

Attorney None

Address

The fee of \$~~5.00~~ allowed on issue of

to

of to be paid when

payment is made on accrued.

Submitted 15.19.19 for admission, W. Barnes, Examiner.

Approved for

Admission

Pay widow as above.

Geo. S. Livingston, Reviewer, April 23, 1919.

W. H. Alexander, Rereviewer, April 24, 1919.

M. C. Mcne

Claimant

writes.

CIVIL WAR

ACT OF MAY 11, 1912.

AMENDED BY ACT, MARCH 4, 1913

No. 809,379



## BUREAU OF PENSIONS

It is hereby certified That in conformity with the laws of the  
 United States Joseph Goss  
 who was a Private Co. I, 31<sup>st</sup> Regiment, Wisconsin Infantry

is entitled to a pension at the rate of  
 Twenty-four dollars per month from June 15, 1915  
 and Thirty dollars per month from June 15, 1920.  
 dollars per month from

Given at the Department of the Interior this  
 Twenty-fifth day of October  
 one thousand nine hundred and fifteen  
 and of the Independence of the United States  
 of America the one hundred and fortieth.

*W. H. H. Jones*  
 Secretary of the Interior

Countersigned

*W. H. H. Jones*  
 Commissioner of Pensions

Former payments covering any portion of the time to be deducted



That section forty-seven hundred and forty-five; title fifty-seven of the Revised Statutes of the United States is hereby amended to read as follows:

Sec. 445.—Any pledge, mortgage, sale, assignment, or transfer of any right, claim, or interest in any pension which has been, or may hereafter be, granted, shall be void and of no effect, and any person who shall pledge, or receive as a pledge, mortgage, sale, assignment or transfer of any right, claim, or interest in any pension, or pension certificate, which has been, or may hereafter be, granted or issued, or who shall hold the same as collateral security for any debt or promise, or upon any protest of such security, or promise, shall be guilty of a misdemeanor, and upon conviction thereof shall be fined in a sum not exceeding one hundred dollars and the costs of the prosecution; and any person who shall retain the certificate of a pensioner and refuse to surrender the same upon the demand of the Commissioner of Pensions, or a United States pension agent or any other person, authorized by the Commissioner of Pensions, or the pensioner, to receive the same shall be guilty of a misdemeanor, and upon conviction thereof shall be fined in a sum not exceeding one hundred dollars and the costs of the prosecution.

Approved February 28, 1883.

No. 809,379.  
PENSION CERTIFICATE OF

Joseph Goss.

Payable Quarterly

by the

Disbursing Clerk,  
Bureau of Pensions.

Group 1.

Former Agency

Milwaukee



M. D. B.

Clerk.

J. W. F.

Coral Pa.

March 26<sup>th</sup> 1919

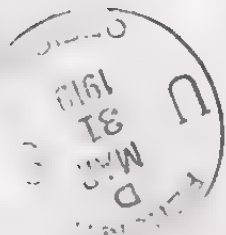
Adjutant General.

Dear Sir:

Inclosed you will find The original certificate of marriage.

You will please understand our marriage in 1914 was a remarriage by the Priest simply to admit Mr Goss back into the Catholic Church.

I could not find the witnesses as they were school girls at The St Boniface School at that time and they have left the city. Their whereabouts unknown.



Respectfully

Margaret R. Goss  
Coral  
Indiana Co Pa



Group.....

TO BE SECURELY ATTACHED TO THE PENSION CERTIFICATE.

Inv. Ctf. ....

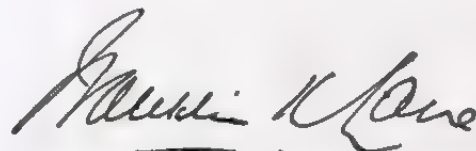
DEPARTMENT OF THE INTERIOR,  
Bureau of Pensions,  
Washington, D. C.

Soldier.....

Pursuant to the Act of Congress approved by the President June 10, 1918, amending the Act of May 11, 1912, the pension in the above-described case is increased to \$..... per month, commencing June 10, 1918.



Commissioner of Pensions.



Secretary of the Interior.

ORIGINAL

and nine hundred and

*for de. acc. o*

THE  
CITY OF NEW YORK  
JAN 10 1891

PAID IN FULL

*Car. M. Jones, Esq.*

W.E.  
Group 1  
Civil

ACT OF MAY 11, 1912,  
ACT OF MARCH 4, 1913

Cert. No. 809,379.-

Claimant

P. O.

County,

State,

Rate, \$27- per month, commencing

Rank,

Service,

ATTORNEY OR STATE REPRESENTATIVE.

(Order April 25, 1907.)

Name,

P. O.,

Fee, \$; Agent to pay.

Articles filed, 19

APPROVAL.

Submitted for exam, Oct 7, 1915, Wheeler Examined.

Approved for incision Rate \$24, per month; age 70 years.

Date of birth June 15, 1845

Length of pensionable service: 2 years, 6 months, 23 days.

Deductions in service from any cause: none years, months, days,

on account of

October 21, 1915, H. B. Buckingham  
Legal Reviewer.

Oct. 22, 1916, M. C. Anderson  
Re-Reviewer.

Enlisted December 16, 1862, honorably discharged July 8, 1865

Enlisted to other service, 18; honorably discharged, 18

Enlisted, 18; honorably discharged, 18

Length of pensionable service: 2 years, 6 months, 23 days.

Pensioned at \$18, per month, under act of May 11, 1912

PRESENT CLAIM, ACT OF MAY 11, 1912.

Letter  
Declaration filed

Age shown by evidence 70 years; date of birth June 15, 1845

Claimant does write.

M. C.



Receipt acknowledged by June 4/15  
Mail & Supplies Division  
Metwankie Wis

Com. Pensions, Washington D.C

Dear Sir I will be 70 years old  
June 15. Will I have to make an  
application for increase I was born  
June 15<sup>th</sup> 1845 - you have the Records there  
My Certificate under act - May 11  
1912 is 809.379.

Joseph Goss. Co. I. 31 Wis Regt  
Entered Dec. 16<sup>th</sup> 1862.

discharged July 8<sup>th</sup> 1865 -

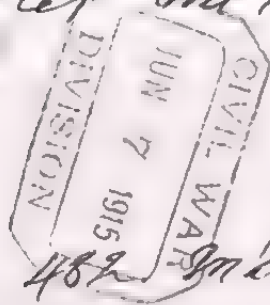
if I have to make a new application  
let me know

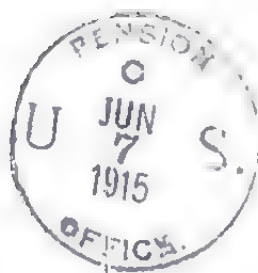
Yours Truly

Joseph Goss.

482 Murray ave

Metwankie  
Wis





ACT OF MAY 11, 1912.

Cert. No. 809379.

Claimant, Joseph Goss

P. O., Campbellsville

Rank, Private

County, Fond du Lac

Service, Co I

State, Wisconsin

31" Tras Inf.

Rate, \$ 18 per month, commencing May 25, 1912.

## ATTORNEY OR STATE REPRESENTATIVE.

(Order April 25, 1907.)

Name, none.

Fee, \$; Agent to pay.

P. O.,

Articles filed, 19

## APPROVAL.

Submitted for Adm. Dec. 5, 1912, M. L. Mull, Examiner.

Approved for Admission. Rate \$ 18 per month; age 66 years.

Reissue from Act of February 6, 1907.

Length of pensionable service: 2 years, 6 months, 23 days.

Deductions in service from any cause: none years, months, days,  
on account of

Dec. 21, 1912, P. J. Gallagher, Legal Reviewer. Dec. 23, 1912, M. W. Anderson, Re-Reviewer.

Enlisted Dec. 16, 1862; honorably discharged July 8, 1865

Enlisted, 18; honorably discharged, 18

Enlisted, 18; honorably discharged, 18

Length of pensionable service: 2 years, 6 months, 23 days.

Pensioned at \$ 12 per month, under Act of Feb. 6, 1907.

## PRESENT CLAIM, ACT OF MAY 11, 1912.

Declaration filed May 25, 1912.

Age shown by evidence 66 years; date of birth alleged June 15, 1845.

Claimant does write.

no

M. C.



*MLM*

DEPARTMENT OF THE INTERIOR  
BUREAU OF PENSIONS

Washington, D. C., Nov. 29, 1912.

Respectfully returned to The  
Adjutant General,  
War. Deph, requesting  
soldier's age at en-  
listment and any  
other age of record.

*Cf 800 379*

*Joseph Ross  
les 31 " War. Deph.*

*(1 inc.)*

*Commissioner*

WAR DEPARTMENT,

THE ADJUTANT GENERAL'S OFFICE,

WASHINGTON,

DEC 8

Respectfully returned to the

Commissioner of Pensions,

with the information that in the case of

*Joseph Ross*  
Co. I, 21 Reg't Wis. Infy.

the records show personal description as follows:

Age *18*, height \_\_\_\_\_ feet, \_\_\_\_\_ inches,

complexion \_\_\_\_\_,

eyes \_\_\_\_\_, hair \_\_\_\_\_,

place of birth \_\_\_\_\_,

occupation \_\_\_\_\_.

*age on morale 18.*

*Geo Andrews*

The Adjutant General,

# EXAMINING SURGEON'S CERTIFICATE

IN THE CASE OF AN ORIGINAL APPLICANT.

1

No. of Application, 210,401

State: Missouri County: Milwaukee  
Post Office: Milwaukee Nov 1<sup>st</sup>, 1876

Applicant's residence.

We hereby certify, That we have carefully examined  
Jos. Goss, late a Private  
Co. I, 31<sup>st</sup> Regt, Wis. Vols.

in the service of the United States, who is an APPLICANT for an  
invalid pension by reason of alleged disability resulting from

Degree of disability.

Paralysis  
In our opinion the said Jos. Goss  
is not incapacitated for obtaining his subsistence  
by manual labor from the cause above stated.

Origin.

Judging from his present condition, and from the evidence before  
us, it is our belief that the said disability did originate  
in the service aforesaid in the line of duty.

Probable duration.

The disability is

A more particular description of the applicant's condition is  
subjoined:

Particular description.

Height, 5' 9 1/2; weight, 165; complexion, dark;  
age, 20; pulse, 76; respiration, 18

There are no objective symptoms of  
Paralysis, either local or general.  
On extension of the arms the trembling  
of both hands is equal. The muscular  
development is equally good on  
both sides.

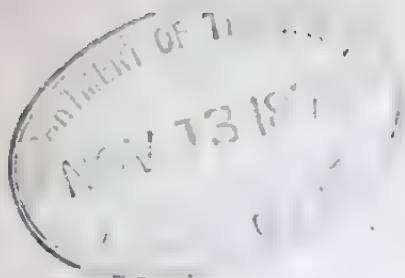
The only subjective symptom is a  
feeling of numbness in the fingers which he  
only mentions when questioned.

There are no indications of cranial or  
spinal difficulty.

R. B. Brown  
Examining Surgeon.

1 SURGEON'S CERTIFICATE 1

IN CASE OF  
*John J. Luss*  
Co *A*, *31*" Reg't, *Wis. Vols.*



APPLICATION FOR PENSION.

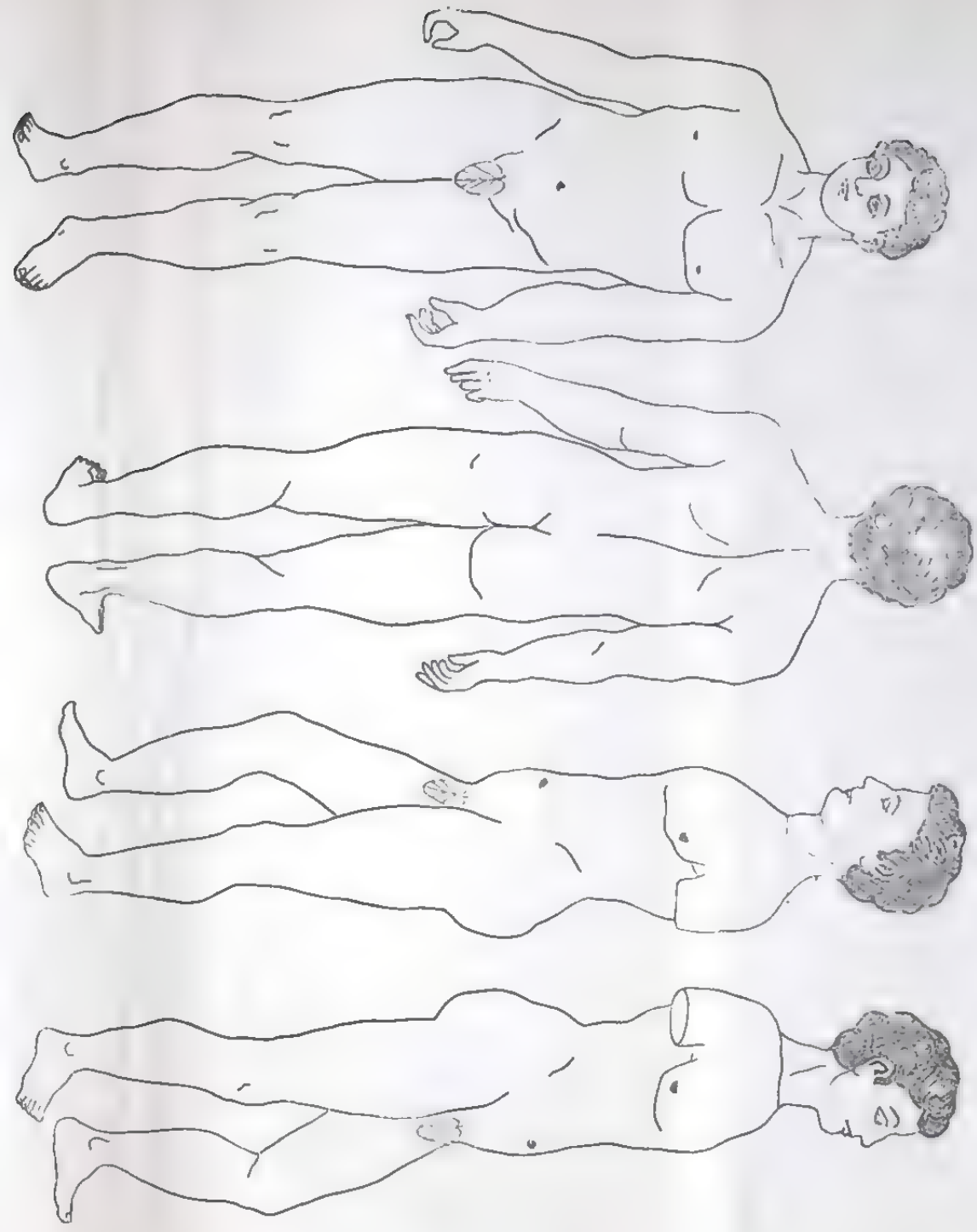
No. *210,401*

DATE OF EXAMINATION,  
*Nov. 1 '1876*

*Milwaukee*  
*Board* Examining Surgeon. S

Post Office, *Milwaukee*  
County, *Milwaukee*  
State, *Wisconsin*

P. S.—Write Post Office address plain and in full.





Attention is invited to the outlines of the human skeleton and figure upon the back of this certificate, and they should be used whenever it is possible to indicate precisely the location of a disease or injury, the entrance and exit of a missile, an amputation, &c.

The absence of a member from a session of a board and the reason therefor, if known, and the name of the absentee, must be indorsed upon each certificate.

Insert character and number of claim.

Original

Pension Claim No. 210401

[State above whether for original, increase, or restoration.]

Name and rank of claimant.

Joseph Goss,

, Rank, P.

Claimant's post-office address.

Company 1, 31 Reg't Wis. Inf.

Fond du Lac, Wis.

State,

Dundee, Wis.

[Post-office address of the Board.]

Oct. 23rd.

, 1891.

[Date of examination.]

We hereby certify that in compliance with the requirements of the law we have carefully examined this applicant, who states that he is suffering from the following disability, incurred in the service, viz: Paralysis of left arm and side. Varicose veins of left leg, and kidney disease.

Cause of disability.

If a pensioner, fill in the amount; if not, erase the whole line.

and that he receives a pension of \_\_\_\_\_ dollars per month.

Here give the claimant's statement as briefly and as compactly as possible.

He makes the following statement upon which he bases his claim for an original [Original, increase, restoration, &c.] pension; that he is suffering with the disabilities above named.

Here give a full description of the disability, in accordance with pars. 5, 6, 51, 52, &c., of Book of Instructions for 1889

Upon examination we find the following objective conditions: Pulse rate, 96 respiration, 22; temperature, 98 1/2 height, 5 feet 9 1/2 inches; weight, 164 pounds; age, 43 years. General appearance medium; muscles quite firm and well developed.

There is no paralysis of left arm or side.

There are varicose veins of both legs extending from the dorsum of the foot to the popliteal space; they are large, numerous, and tortuous. No tendency to ulceration. The internal and external saphenous are both involved. The left leg is the worst, it measures in middle of calf one half inch larger than right at same point.

There is no disease of kidneys; urine acid Sp. Gr. 1020 normal.

He has never catarrh and pharyngitis. The throat and nasal passages are much inflamed.

There are two internal piles as large as filberts. Intestum is inflamed and hemorrhoidal vessels engorged.

Except as above stated; all organs normal.

Rate for EACH cause of disability.

He is, in our opinion, entitled to a 4/13 rating for the disability caused by Varicose veins. 4/13 for that caused by Catarrh, and 4/13 for that caused by Piles No Parylisis, or disease of kidneys.

M. Miley Res. H. J. Rutchin Sec'y J. H. M. Neel Treas.

N. B.—Always forward a certificate of examination whether a disability is found to exist or not.



## SURGEON'S CERTIFICATE

IN CASE OF

Joseph Goss,

Co. 1, 31 Reg't Wis. Inf.

*Applicant for* Original

No. 210401

DATE OF EXAMINATION:

Oct. 23th., 1891

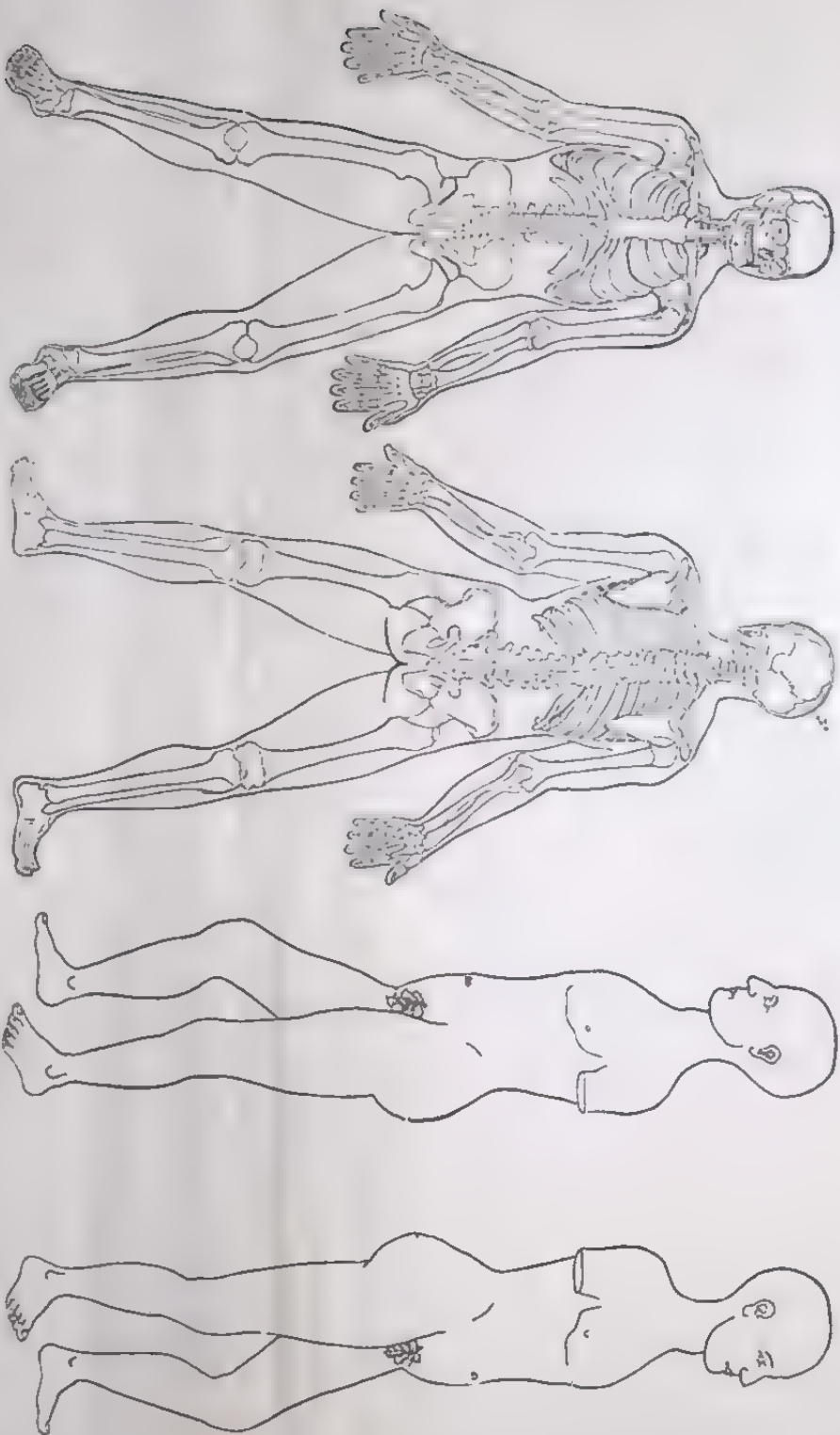
<u>M. Miley</u> , Pres.,	} BOARD.
<u>H. J. Kitchin</u> , Sec'y,	
<u>J. A. Mueb</u> , Treas.,	

Post office, Fond du Lac

County, Fond du Lac

State, Wisconsin.

P. S.—Write your Post-office address plainly and in full.



Single surgeons will use this blank, changing "we" to read "I," and "our" to read "my." They will erase the words "Pres.," "Sec'y," "Treas.," and "Board" where the words appear, and sign at the foot of the certificate, and also on the back of the same.

Provided further, That all examinations shall be thorough and searching, and the certificate contain a full description of the physical condition of the claimant at the time, which shall include all the physical and rational signs and a statement of all the structural changes. [Extract from Section 4, Act of Congress approved July 25, 1882.]

Attention is invited to the outlines of the human skeleton and figure upon the back of this certificate, and they should be used whenever it is possible to indicate precisely the location of a disease or injury, the entrance and exit of a missile, an amputation, etc. The absence of a member from a session of a board and the reason therefor, if known, and the name of the absentee, must be indorsed upon each certificate.

Insert character and number of claim.

*Increase*  
[State above whether for original, increase, or restoration.]

Pension Claim No.

*809379*

Name and rank of claimant.

*Joseph Goss*

Rank, *priv.*

Company *7*, *31* Reg't *Wis. Inf.*

*Fond du Lac, Wis.* State,

Claimant's post-office address.

*Campbellport, Wis.*

*Aug. 18<sup>th</sup>*, 189*7*

[Date of examination.]

We hereby certify that in compliance with the requirements of the law we have carefully examined this applicant, who states that he is suffering from the following disability, incurred

Cause of disability.

in the service, viz:

If a pensioner, fill in the amount; if not, erase the whole line.

and that he receives a pension of *eight* dollars per month.

He makes the following statement upon which he bases his claim for *increase*  
[Original, increase, restoration, &c.]

Here give the claimant's statement as briefly and as compactly as possible.

*varicose veins of both legs, catarrh, disease of rectum & lumbar. Also paralysis of left arm & hand, piles & kidney disease.*

Here give a full description of the actual or probable origin of every existing disability must be fully set forth.

Upon examination we find the following objective conditions: Pulse rate, *90 standing 78 sitting*; respiration, *24*; temperature, *98 3/4*; height, *5* feet *9 3/4* inches; weight, *165* pounds; age, *53* years. *Varicose veins of both legs involving external & internal saphenous veins below knees as indicated on chart. Veins of left leg are little larger.*

*Disab. 9/18*  
*Paralysis of left arm: no objective symptoms. When it gets cold there is a loss of sensation in little & ring finger and the whole hand & arm become numb. No atrophy although muscles of left arm are 1/2 in less in circumference than those of right.*

*Disab. 9/18*  
*Rectum: Is congested; there are two internal piles inflamed 1 1/4 x 3/4, 1 1/2 x 1 1/4 in.*

*Disability - 9/18*  
*Lumbar: Muscles of left side of lumbar region tense & contracted complains of pain on movement. No atrophy of the muscles.*

*Disab. 9/18*  
*Catarrh: has severe naso-pharyngeal catarrh. Disab. 8/18*

*Disab. 9/18*  
*Kidney disease: Urine: amber acid Sp. gr. 1.022, no albumen, no sugar. Prostate 1/4 larger than normal.*

*Disab. 9/18*  
*Heart: Impulse heart seen & felt at apex in 5th intercostal space 2 in diameter. Aortic valve open & closed to the right 2 1/2 in. & down 2 in. Valves normal. Pulse 78 sitting 90 standing 120 exercise.*

*Disab. 9/18*  
*There is dilatation of heart. Dyspnea on slight exertion.*

*General disability: looks 65 years old - Muscles soft. Palms soft. no evidence of vicious habits.*

*Total Disability - 15/18*

Each disability must be rated separately, the act of Congress of March 2, 1895, requiring "that the report of such examining surgeons shall specify the rating which, in their judgment, the applicant is entitled to."

Pres.

*J. H. [Signature]*

Treas.

N. B.—Always forward a certificate of examination whether a disability is found to exist or not. If sufficient space is not afforded for the necessary statements called for, additional paper should be neatly attached.



(This certificate to be filled in and signed by the secretary when full board is present.)

"I hereby certify that Dr. *Karl Desombre*, Dr. *G.B. McKnight* and Dr. *S.A. Himm* were personally present and actually participated in the examination of *Joseph Goss*, the claimant in this case, on *18* day of *August*, 18 *97*.

(Signature.)

(This certificate to be filled in by the member of the board acting as secretary, and signed by the applicant, when a full board is not present.)

"I, \_\_\_\_\_, the applicant for (increase or original) pension referred to in this medical certificate, hereby consent to be examined by Dr. \_\_\_\_\_ and Dr. \_\_\_\_\_, the examining surgeons here present (waiving examination by full board), on this \_\_\_\_\_ day of \_\_\_\_\_, 18 \_\_\_\_."

(Signature.)

# SURGEON'S CERTIFICATE

IN CASE OF

*Joseph Goss*  
Co. F, 31 Regt W.B. Inf.

Applicant for increase

No. *809379*

DATE OF EXAMINATION:

*Aug. 18*, 18*97*

BOARD.

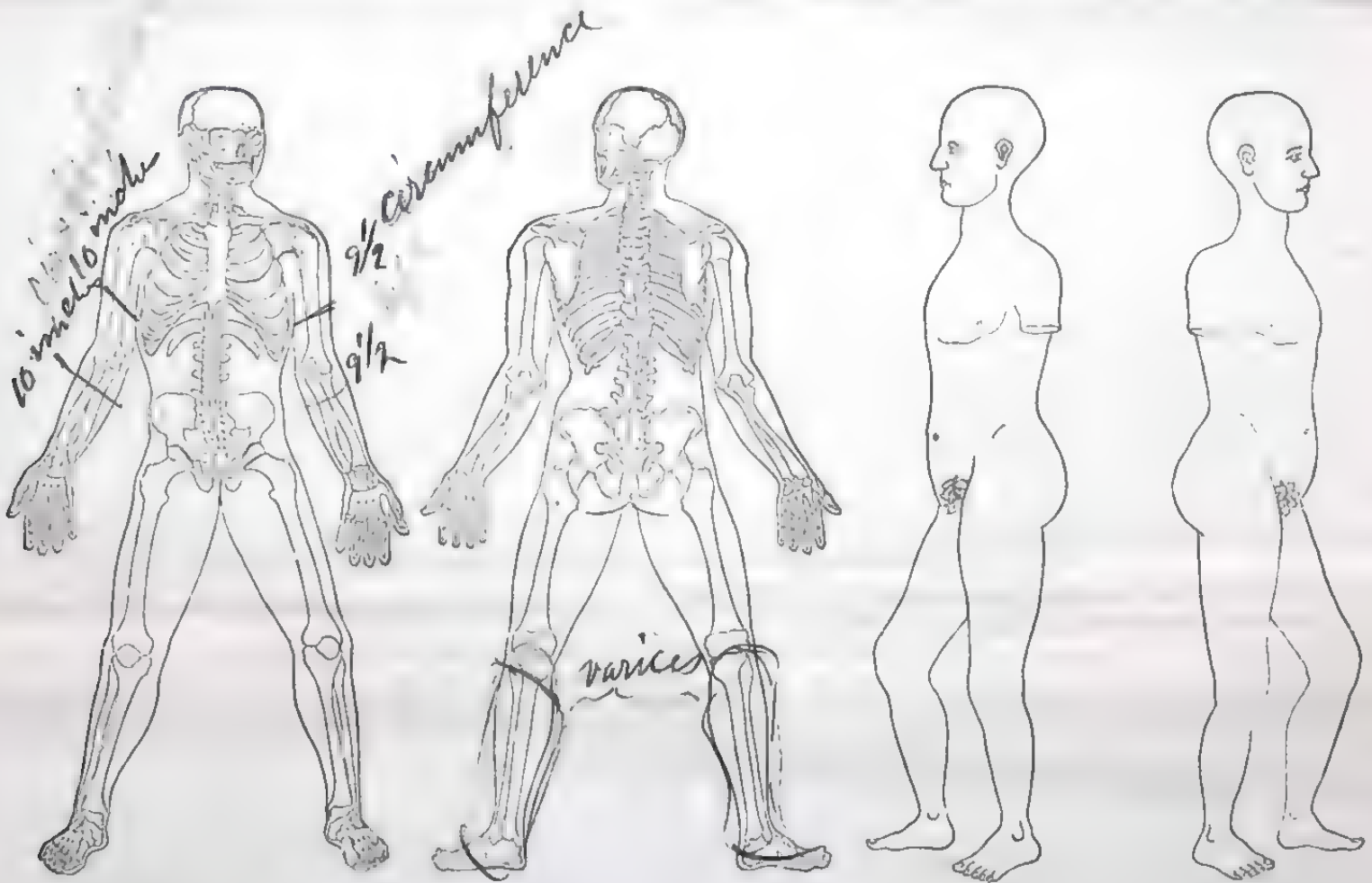
*Karl Desombre*, Pres.,  
*S.A. Himm*, Sec'y,  
*G.B. McKnight*, Treas.,

Post office,

County,

State,

P. S.—Write your Post-office address plainly and in full.



Single surgeons will use this blank, changing "we" to read "I," and "our" to read "my." They will erase the words "Pres.," "Sec'y," "Treas.," and "Board" where the words appear, and sign at the foot of the certificate, and also on the back of the same.

PROVIDED FURTHER, That all examinations shall be thorough and searching, and the certificate contain a full description of the physical condition of the claimant at the time, which shall include all the physical and rational signs and a statement of all the structural changes. [Ex-tract from Section 4, Act of Congress approved July 25, 1882.]



## SURGEON'S CERTIFICATE.

Insert character  
and number of  
claimName of claim-  
ant.Claimant's post-  
office address.Cause of dis-  
ability.

Pension Claim No.

Address  
of Board.

P. O.

State.

189

[Date of examination.]

He receives a pension of

dollars per month.

Here give the  
claimant's  
statement (as  
briefly and as  
compactly as  
possible) in re-  
gard to the orig-  
in of his dis-  
ability and the  
manner in  
which they  
affect him.

He makes the following statement upon which he bases his claim for

Increase  
(Original, increase, restoration, etc.)

Paralysis of left arm + side, result of  
injury, varicose veins of both legs,  
nasopharyngeal catarrh & disease of rectum  
& sigmoid. Constipation, disease  
of heart & any other disability.

Attention is invited to the outlines of the human skeleton and figure upon the back of this certificate, which should be used to indicate precisely the location of a disease or injury, the entrance and exit of a missile, an amputation, etc.

We hereby certify that upon examination we find the following objective conditions:

Pulse rate, 128, respiration, 24-28, temperature, 98.  
[Sitting, standing, after exercise.] [Sitting, standing, after exercise.]

height, 5 feet 8 inches; actual weight, 155 pounds; age, 55 years.

Here give a full  
description of  
the disabilities,  
in accordance  
with Book of  
Instructions.

Kidneys - normal - Urine clear, acid sp. gr. 1.018  
No sugar, no albumen vis 9/18  
Chest 35 1/2, 36, 37 1/2 Heart apex beat not seen on  
organs. dullness proper lower border of 2nd rib and  
middle of sternum 5 1/2 inch within nipple line  
No murmurs no cyanosis. no dyspnea  
No edema except as specified in der. vom vom vis 9/18  
Lungs. Pulpation, percussions + auscultation Normal vis 9/18  
Stomach. Tongue coated. Sives history of frequent head  
ache. Tympany from 6 rib to 2 inches above navel  
history of indigestion of gas after eating. also pain  
intermittent. Dyspepsia + distended + more than  
normal with gas. Colic vis 9/18 distended with hard  
fecal debris vis 9/18 Constipation. Sives history  
of obstinate constipation. Colon vis 9/18 distended with  
hard fecal debris vis 9/18. Pressure of Rectum  
Rectum completed vis 9/18. Plus Sives history of no violence vis 9/18  
Large bags. Sives history of severe muscular pains + stiffness  
of lower muscles. Tender on pressure + flexion back  
pain vis 9/18. Varicose veins. of femoral + internal  
saphenous veins + branches of both legs + feet. Distended  
3 times more than normal. Arteries of both feet + ankles vis 9/18  
Paralysis of both left arm + side. Sives history of 2nd  
evidence of extreme weakness of muscles of left fore arm vis 9/18  
General debility. Pulse soft looks 65 years old  
Sives evidence of both eyes. vessels of blood vessels hard  
muscles left vis 9/18. Nasopharyngeal catarrh  
no more seen in throat + cold with purulent  
secretion. Sives history of greatly enlarged  
glands normal vis 9/18. Occupation Mail carrier  
no other evidence of vicious habits or other disabilities

The actual or  
probable origin  
of every exist-  
ing disability  
must be fully  
set forth.Whenever a dis-  
ability is shown  
or is believed  
to be due to or  
aggravated by  
vicious habits  
the opinion of  
the board must  
be stated. When  
not due to such  
habits this fact  
must be stated.Each disability  
must be rated  
separately, the  
act of Congress  
of March 2,  
1895, requiring  
"that the report  
of such exam-  
ining surgeons  
shall specify the  
rating which, in  
their judgment,  
the applicant is  
entitled to."When rates are  
recommended  
solely on sub-  
jective evi-  
dence the  
strongest rea-  
sons must be  
given therefor.

J. M. Power, Pres. J. H. Power, Sec'y. G. C. Power, Treas.

N. B.—Do not use backs of certificates for any purpose other than indicated by printed matter thereon. When additional space is needed to complete report of examination use blank certificate (3-111 g) properly numbered, and attach it to the back and upper margin of this sheet. Marginal entries must never be made.

An examination must not be made by one member of a board except upon a special order of the Commissioner of Pensions.

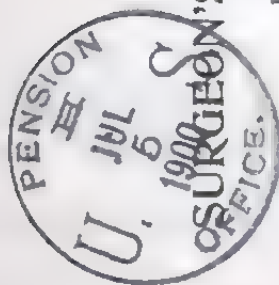
(This certificate to be filled in and signed by the secretary when the full board is present.)

"I hereby certify that Dr. J. W. Powell, Dr. J. H. Rimmer  
Dr. G. B. Bove, were personally present and actually participated in the  
examination of Joseph Goss, the claimant in this case, on 30 day  
of June, 1890  
(Signature.) J. H. Rimmer

(This certificate to be filled in by the member of the board acting as secretary, and signed by the applicant, when a full board is not present.)

"I, Joseph Goss, the applicant for (increase or original) pension referred  
to in this medical certificate, hereby consent to be examined by Dr.                      and  
Dr.                     , the examining surgeons here present (waiving examination by  
full board), on this                      day of                     , 18 90."

(Signature.)



IN CASE OF

Joseph Goss  
Co. 31 Reg't Wis. Inf.

APPLICANT FOR

Increase

Sp. No. 809379

DATE OF EXAMINATION:

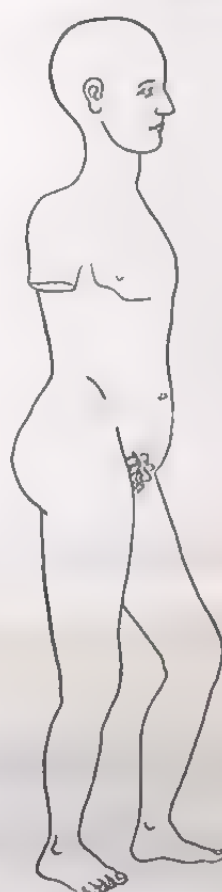
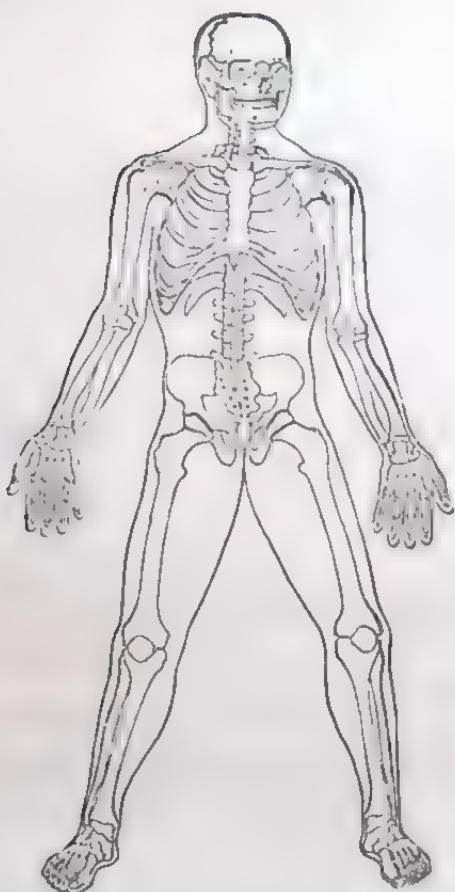
30 June, 1890

J. W. Powell, Pres.,  
J. H. Rimmer, Sec'y,  
G. B. Bove, Treas.,  
BOARD.

Post office, Fond du Lac  
County, Fond du Lac

State, Wis.

P. S.—Write your Post-office address plainly and in full.

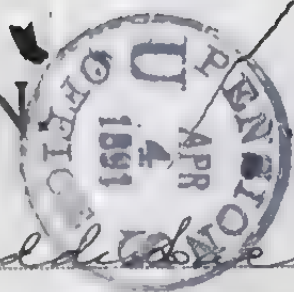


Single surgeons will use this blank, changing "we" to read "I." They will erase the words "Pres.," "Sec'y," "Treas.," and "Board" where the words appear, and sign at the foot of the certificate, and also on the back of the same.

"All examinations shall be thorough and searching, and the certificate contain a full description of the physical condition of the claimant at the time, which shall include all the physical and rational signs and a statement of all the structural changes." [Extract from Section 4, Act of Congress approved July 25, 1892.]



# EXAMINATION



State of Wisconsin County of Fond du Lac ss.

Doctor's name and  
office address.

E. J. Orris M. D., whose P. O. address

is New Cassel County of Fond du Lac State of Wisconsin

being first duly sworn, says that his age is now 36 years, and that he is a regular practicing physician of 7

Name of soldier.

years standing, and that he has this day examined carefully one Joseph Goss

who, he is informed was late a private in Company I Reg't 31st Wis.

Vols., and finds him afflicted as follows: A general weakened condition

of the whole of the left side, as a result of

partial paralysis <sup>superior</sup> ~~inferior~~ years ago. The power of

left hand is not one half normal, and a

halting gait, some dragging of left limb.

Exaggerated reflex in left limb.

The Claimant's left limb below the knee

is affected with varicose veins to an

unusual degree. They alone disabling him

from doing work that necessitates bending

on his feet. Enlarged prostate causes the usual

discomforts and inconveniences incident to that condition.

and he further says that the said Joseph Goss is incapacitated for the performance

of manual labor by reason of aforesaid disabilities in about the following degree: Claimant is not able to do manual

labor on his feet any of the time, but light

work one half the time.

.....

and the affiant further says that he is in nowise interested in the prosecution of this claim for pension.

E. J. Orris M. D.

Affiant's Signature.

Subscribed and sworn before me this 9th day of March 1891

The affiant is a credible witness, and the person he represents in the foregoing affidavit. I am not interested in this claim. Witness my hand and seal the day and year above written.

Not a true Justice of the Peace [L. S.]  
[Official Signature.]

DOCTOR: Here give  
a full and clear diag-  
nosis of the disability  
upon which pension  
is claimed as you find  
it now upon examina-  
tion, and state what  
was the probable  
cause, giving all ra-  
tional and physical  
signs of each disease.

Here state in about  
what degree claimant  
is disabled, IN YOUR  
JUDGMENT. That is,  
state about how much  
of the time he is not  
able to work.



# EXAMINATION

—BY—

## CIVIL SURGEON.

No. 210,401

CLAIM OF

Joseph Goss

Co. I-31<sup>st</sup> Wis Reg't. Vols.

FOR

Original Pension.

dat of June 27/90.

FILED BY

CHARLES J. DONNELLY & CO.,

ATTORNEYS,

WASHINGTON, D. C.

V. B. CLARKSON, PRINTER, 1012 Penn. Ave., Washington, D. C.



# ORIGINAL INVALID PENSION.

Claimant, *Joseph H. Goss.*  
P. C., *248 Jackson St., Milwaukee* Rank, *Priv.*  
County, *Milwaukee* Company, *C.*  
State, *Wis.* Regiment, *31<sup>st</sup> Wis. Inf.*  
Attorney, *Gilman & Co. Patent.*  
Fee, *Contract filed.*  
Rate, */*, commencing

Disabled by

Submitted for Reg. *Dec 22<sup>nd</sup> 1876*, by *J. H. Patrick.* Examiner.

Approved for *rejection*  
*Not disabled*

Approved for *disability from*  
*causes alleged*

*J. D. Jefferson*  
*Dec. 29, 1876*

Reviewer. *Dec. 30, 1876,*

*W. Pickens*  
Med. Reviewer.

Enlisted *Dec 16<sup>th</sup> 1862.* service from  
Mustered *Dec 16<sup>th</sup> 1862.* 18, to 18, in  
Discharged *July 8<sup>th</sup> 1865.*  
Declaration filed *Nov 20<sup>th</sup> 1875.* Not in military or naval service since  
Last material evidence filed 18, 18, when discharged.

## BASIS OF CLAIM.

Alleges *Paralysis of left arm and left side the result*  
*of an injury by falling over a log in action at Atlanta*  
*Ga. Aug 12<sup>th</sup> 1864.*

~~This~~ Declaration **MUST** be executed before a Clerk of Court of Record.

# Declaration for Original Invalid Pension.

State of Wisconsin  
Milwaukee County, } SS.

On this 16<sup>th</sup> day of November 1875 before me, a Clerk of a Court of Record in and for the County and State above named, personally appeared, Joseph Gopf, a resident of 248 Jackson St in the County of Milwaukee and State of Wisconsin aged        years, who being duly sworn according to law, declares that he is the identical Joseph Gopf who was a Private of Company 9 in the 31 Regiment of Wisconsin Volunteers, in the war of 1861, for the suppression of the Rebellion.

That he volunteered at Madison in the State of Wisconsin on or about the 16 day of December 1862 for the term of        and was honorably discharged at Louisville Ky on the 8 day of July 1863 being all the service he ever rendered.

That while in said service in the line of his duty at Atlanta in the State of Georgia on or about the Twelfth day of August 1864 he contracted Paralysis of left arm and left side the result of an injury by falling over a log in action for which injury he was treated by the Regimental Surgeon.

He makes this declaration for the purpose of being placed on the Invalid Pension Roll of the United States, by reason of the disability above stated; and hereby constitutes and appoints E. B. JACKSON, of Philadelphia, his Attorney, with power of substitution, to prosecute this claim and procure a Pension Certificate.

Witnesses to mark.

[1]

Joseph Gopf  
Claimant signs here

Sworn to, subscribed and acknowledged before me, the day and year first above written, and on the same day personally appeared John Divine and M. Healy

residents of Milwaukee who being duly sworn according to law, declared that they

are personally acquainted with Joseph Gopf who has made and subscribed the foregoing declaration in their presence, and that they have every reason to believe from the appearance of the applicant, and their acquaintance with him, that he is the identical person he represents himself to be; that they reside as above stated, and are disinterested in this claim for a Pension.

John Divine

[2]

John Divine

M. Healy

[3]

M. Healy

Witnesses to mark.

Identifying Witnesses sign here

Sworn to and subscribed before me; and I certify that I am not interested in the claim or concerned in its prosecution; that I believe the affiants to be credible persons, and the claimant is the person he represents himself to be, and that the foregoing was read and explained to the applicant and his witnesses before signing and swearing.

[4]

Patrick Connolly Jr  
Clerk of Circuit Court  
Milwaukee County, Wis.

Note--Whenever the Claimant or Identifying witnesses sign by mark, it must be attested by two persons other than the identifying witnesses.

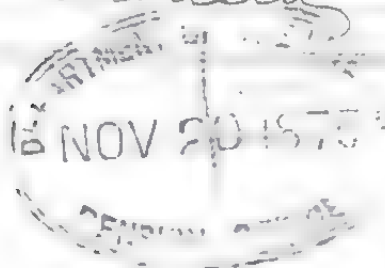


DECLARATION  
FOR  
**ORIGINAL PENSION.**

*Joseph Goss*

*Private Co. I. 31* Regt.

*Wisconsin* Vols.



---

FILED BY

**E. B. JACKSON, Attorney**  
**PHILADELPHIA.**

Oct. 7/19, a.c. of this  
 person advised of ul-  
 timatum of a.c. and

INVALID.

Cert. No. 809379

Name, Josephine

Rank, 1st; Service, 31st Div Inf

Agency: Original Roll: Warrenton  
 Transf'd 1 to Comp 1  
 " 1 to

Issued Dec 26 1912  
 Mailed DEC 27 1912  
 Rate and period, \$ 18, from May 23 1911

Fee, \$  
 Deductions \$  
 Entered Disability: **DEAD**

Issued Oct 25 1915  
 Mailed  
 Rate and period, \$ 20, from June 15 1915  
 Fee, \$

Deductions \$  
 Entered Disability: ACT OF MAY 11, 1912

Issued  
 Mailed  
 Rate and period, \$ 11 from

Fee, \$  
 Deductions:  
 Entered Disability:

Issued  
 Mailed  
 Rate and period, \$ from

Fee, \$  
 Deductions:  
 Entered Disability:

Issued  
 Mailed  
 Rate and period, \$ from

Fee, \$  
 Deductions:  
 Entered Disability:

INDORSEMENTS.

DEC 26 1918 Acc'd blank to  
 widow

**DROPPED**

DEC 27 1918 CET FINANCE

Aug 25 - 1919  
 marriage of returned  
 to widow Mrs Mary Ann  
 H. Ross - copy retained  
 W. H. Lamm

E. J. ORVIS, M. D.,

Office Hours: From 11 a.m. to 2 p.m., and 7 to 8 evenings.  
Office:  or Drug Store.

Campbell'sport, Wis., March 25th 1895.

RECEIVED  
2 1895  
VISION

This is to certify that in addition to Varicose veins of both legs. many renal Catarrhs and mental disease that I find Joseph Goss of Dundee, Wis. of Penseance; re of Certificate 809379. to be also suffering from enlarged prostate gland causing constant frequent desire to void urine, with at times inability except after waiting, and straining and then with burning & smarting. The condition also necessitates Mr. Goss rising from two to four times nightly to urinate. The enlarged prostate, with consequent catarrh of bladder is further serious cause for disability, and incapacitates him from these further

E. J. Orvis M.D.



This statement - was all  
written by me, with out  
preparation or dictation by any  
other person, and is the result  
of personal knowledge.

E. J. Davis.

State of Wisconsin }  
County of Fond du Lac } ss

This is to certify that E. J. Davis  
is a practicing physician in good  
standing, that I have known him as  
such for over eight years and that the  
above statement by him made is in  
his own handwriting and the signature  
thereunto genuine.

John A. Lucas.

Notary Public

Fond du Lac Co. Wis.

Act of June 27, 1890.

# INCREASE **INVALID PENSION.**

Claimant, Joseph Goss. 04809379.  
 P. O., Campbellsport. Rank, Private.  
 County, Wood-dusse. Company, J.  
 State, Wisconsin. Regiment, 31 Mo. Vol. Inf.  
 Rate, \$ \_\_\_\_\_ per month, commencing \_\_\_\_\_

Disabled by \_\_\_\_\_

## RECOGNIZED ATTORNEY:

Name, Adj. Gen. J. W. M. Fee \$ 10.00, Agent to pay.  
 P. O., Madison. Articles filed \_\_\_\_\_, 189 \_\_\_\_\_

## APPROVALS:

Submitted for November 27, 1900 Engle, Examiner.  
 Approved for varicose veins both legs, naso-pharyngeal catarrh and disease of rectum and heart old piles, paralysis kidney disease hunchback, Constipation  
new Alleged January 3, 1900  
Dec 1, 1900 J. Martin Legal Reviewer. December 8, 1900 W. H. M. Medical Referee.  
No increase.

Enlisted December 16, 1862, Honorably discharged July 1865, Last paid to \_\_\_\_\_, at \$ 10.00, for varicose veins of both legs, naso-pharyngeal catarrh, and dis. of rectum and heart. Pensioned Jr. July 1900.  
at \$12 for varicose veins of both legs, naso-pharyngeal catarrh, and dis. of rectum. Pension under other laws at \$ \_\_\_\_\_, for \_\_\_\_\_

ended \_\_\_\_\_  
 Original declaration, act June 27, 1890, filed \_\_\_\_\_, 189 \_\_\_\_\_; alleged \_\_\_\_\_

## PRESENT CLAIM, ACT OF JUNE 27, 1890.

Declaration filed January 3, 1900, alleges varicose veins of both legs, piles, Catarrh, partial paralysis of Left side, dis. of kidneys, hunchback, Constipation, and pain in Left side.



Act of June 27, 1890.

## INCREASE INVALID PENSION.

Claimant,

Joseph Goss.

Serial No. 809379.

P. O., Campbellsport.

Rank, Pvt.

County, Fond du Lac

Company, I.

State, Wisc

Regiment, 31. "W" 1st Regt.

Rate, \$ 10. per month, commencing

August 18, 1897.

Disabled by

varicose veins of both legs, naso-pharyngeal catarrh, dis. of rectum &amp; hemorrhoids.

## RECOGNIZED ATTORNEY:

Name,

Adjutant Genl of Wisconsin.

No Fee \$

Agent to pay.

P. O., Madison, Wis

Articles filed

, 189

## APPROVALS:

Submitted for

October 7, 1897

Approved for

varicose veins of

Approved for

varicose veins of both

both legs, naso-pharyngeal catarrh and

legs naso-pharyngeal catarrh and

unusual catarrh &amp; dis. of rectum (old) &amp; hemorrhoids (new) filed July 25, 1897.

disease of rectum and heart

partial paralysis &amp; dis. of kidneys, no dis. subject to approval of Med. Ref.

\$10 from Aug 18, 1897.

No other disability to affect rate

No other disability to affect rate

Oct. 27, 1897, Benjamin

Hayes

Legal Reviewer.

Nov 5, 1897, Medical Referee.

Enlisted

December 16, 1862

Honorably discharged

July 8, 1865

Last paid

to

at \$12.80

for

varicose veins of both

legs, naso-pharyngeal catarrh &amp; disease of rectum.

Pension under other laws at \$12 from July 19/90. Aer Jun 23 90.

ended

Original declaration, act June 27, 1890, filed

July 19, 1890;

alleges paralysis of left

arm and side, varicose veins of left leg and disease

of kidneys, piles &amp; catarrh, alleged in old law claim.

## PRESENT CLAIM, ACT OF JUNE 27, 1890.

Declaration filed

January 25, 1897,

alleges

varicose veins of both

legs, naso-pharyngeal catarrh and disease of rectum.

Lumbar. Declaration filed June 2, 1897, alleges in addition

constipation, partial paralysis and disease of kidneys.

Claimant works



LAW:

Reissue to

Correct Rate

Claimant,

Joseph Stoss

P.O.,

Dundee

Rank,

Pvt-

County,

Pon-du-lac

Company,

State,

Wis.

Regiment,

31<sup>st</sup> Wis Vol Inf

Rate, \$

per month, commencing April 4, 1895

as per action of Med Ref + Bd of Revision  
in lieu of Ctg. dated Sept. 14, 1892

## ACT OF JUNE 27, 1890.

Revision under Departmental Decision of May 27, 1893, and Office Orders (No. 225) of June 9, 1893,  
and (No. 240) of August 26, 1893.

Respectfully referred to the Medical Referee for his

Approved for reduction to

opinion whether, under the above decisions, the pen-

\$ 6 - per month

sioner is

(Call attention to any pending claim for increase - former pensioned rate)

under another law, or other essential fact

, 189

, Referee.

W. H. Hough

Feb 14, 1895

, Medical Referee.

NOTE.—If the present rate is continued on the above action, cut off the remainder of this blank at this point.

Reference for Notice of Reissue under another Law, Reduction, or Dropping.

Respectfully referred to the Chief of the Notification Section for legal notice to the pensioner that his pension

under the above act will be reduced to \$ 8.

in accordance with the above opinion of the Medical Division

(If action is solely upon conclusive legal grounds, erase this clause and state legal grounds.)

Mar. 5<sup>th</sup>, 1895

H. H. Hough, Referee.

Final Medical Action after Legal Notice and Hearing.

Upon all the evidence now filed in the case the medical action taken Feb. 14, 1895, should

be carried out.

Done May 15, 1895,

, Medical Referee.

Final Legal Action after Notice and Hearing.

Respectfully referred to the Chief of the Board of Review Legal notice and hearing having been

given the pensioner, the decision to reduce the pension to \$ 8.00 in accordance

with the medical action of May 15, 1895, is concurred in.

May 21, 1895

, Referee.

W. H. Hough

NOTE.—If after notification the action is to continue Board of Revision will send case to proper files; if to drop Finance Division will do so; if to reissue under another law or reduce, Board of Revision will forward to Board of Review.

ACT OF JUNE 27, 1890.

## INVALID PENSION.

Claimant, *Joseph Goss,*P. O., *Dundee,*County, *Fond du Lac,*State, *Wisconsin,*Rate, \$ *12*Rank, *Private*Company, *I*Regiment, *31st Wis. Vol. Inf.,*Date, *July 19, 1890,*per month, commencing *August 30, 1890,*Disabled by *Varicose veins of both legs,**naso-pharyngeal catarrh, & dis. of retention*

## RECOGNIZED ATTORNEY.

Name, *C. J. Donnelly & Co.,*P. O., *City,*Fee, \$ *10.00*

Articles filed, \_\_\_\_\_

Agent to pay, \_\_\_\_\_

189\_\_

## APPROVALS.

Submitted for *Adm. Aug 16, 1892*Approved for *Admission*

Sept 1, 1892.

Not

now pensioned under other laws. Last paid to \_\_\_\_\_, 18\_\_\_\_, at \$ \_\_\_\_\_

Pensioned from \_\_\_\_\_, 18\_\_\_\_, at \$ \_\_\_\_\_, for \_\_\_\_\_

## SERVICE SHOWN BY RECORD.

Enlisted *Dec 16, 1862*honorably discharged *July 8, 1865*

Re-enlisted \_\_\_\_\_, 18\_\_\_\_

honorably discharged \_\_\_\_\_, 18\_\_\_\_

Declaration filed *July 19, 1890*

alleges permanent disability, not due to vicious habits,

from *paralysis of left arm and side**varicose veins in left leg and kidney disease. Declaration filed Nov. 20, 75; alleges paralysis, Affidavit filed Jan. 11, 92. " Catarrh. (Check, write, etc.)*



[Act of June 27, 1890.]

## DECLARATION FOR INVALID PENSIONS.

To be Executed before a Court of Record or some Officer thereof having Custody of its Seal.

State of Wisconsin, County of Dundee, ss:ON THIS 10<sup>th</sup> day of July, A. D. one thousand eight hundred and ninetypersonally appeared before me a Justice of the Peace of the Dundee court, a courtof record within and for the County and State aforesaid Joseph Gossaged 43 years, a resident of the Dundee of Dundeecounty of Fond du Lac, State of Wis., who, being duly swornaccording to law, declares that he is the identical Joseph Goss who was enrolledon the 16<sup>th</sup> day of April, 1864, in Co. 3<sup>rd</sup> Regt

[Here state rank, company, and regiment in military

Wis. Vols. service, or vessel, if in the Navy.]in the war of the Rebellion, and served at least ninety days, and was honorably discharged at near Spanishon the 22<sup>nd</sup> day of July, 1865That he is unable to earn a support by reason of Paralysis of left

[Here name the disease or injuries

arm and side result of fall in action.

from which disabled.]

Various diseases of left armand still my disease

That said disabilities are not due to his vicious habits, and are to the best of his knowledge and belief permanent.

That he has applied for pension under application No. 210401 That he is a pensioner under certificate

No. [If a pensioner, the certificate number only need be given; if not, give the number of the former application, if one was made.]

That he makes this declaration for the purpose of being placed on the pension-roll of the United States under the

provisions of the act of June 27, 1890. He hereby appoints

CHAS. J. DONNELLY &amp; CO., Washington, D. C.,

his true and lawful attorneys to prosecute his claim. That his post-office address is Dundeecounty of Fond du LacState of Wis.

Joseph Goss  
 Claimant's Signature)

Attest:

Her CaineJustice of the Peace



State of Wisconsin, County of Fond du Lac.

OFFICE OF CLERK OF CIRCUIT COURT.

*E. H. Gillett*

Clerk of the Circuit Court of the County

*Fred du Lac*, in the State of Wisconsin, the said Clerk of said Court, duly sworn and having a seal, do hereby certify that *Thomas Leane*, Esquire, whose name appears subscribed to the annexed instrument, was, at the date thereof, a Justice of the Peace of said County, duly elected and qualified, and empowered by the laws of said State to administer oaths and take returns judgments of Justice; and that all his acts and proceedings, in such, with and credit are and ought to be given in law and fact. I further certify that I don't believe said signature purporting to be his, is genuine; and that said instrument is executed and acknowledged according to the laws of said State.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of said Court, at

*Fred du Lac* in said County and State, on this *25* day of *August* A. D. 18*90*

*E. H. Gillett*  
Clerk of Circuit Court, as aforesaid.

*E. Blum*

Deputy Clerk.

Also personally appeared Zephiah Bowen residing at Dundee  
Grand du Lac, Co. and Sarah Laine residing at  
Dundee, Grand du Lac, Co. persons whom I certify to be respectable and entitled to credit, and  
who, being by me duly sworn, say that they were present and saw Joseph Goss  
....., the claimant, sign his name (make his mark) to the foregoing  
declaration; that they have every reason to believe from the appearance of said claimant and their acquaintance with  
him for 12 years and ..... years, respectively, that he is the identical person he represents himself to be;  
and that they have no interest in the prosecution of this claim.

Zephiah Bowen  
Sarah Laine  
(Signature of Witnesses.)

Sworn to and subscribed before me this 12<sup>th</sup> day of July A. D. 1890

and I hereby certify that the contents of the above declaration, &c., were fully made known and ex-  
plained to the applicant and witnesses before swearing, including the words.....  
.....erased, and the words.....  
.....added; and that I have no interest, direct or indirect,  
in the prosecution of this claim.

Thos Caine  
(Signature.)  
Justice of the Peace  
(Official Character.)

The act of June 27, 1890, requires, in the case of a soldier:

- (1) An honorable discharge (but the certificate need not be filed unless called for).
- (2) A minimum service of ninety days.
- (3) A permanent physical disability not due to a disease which did not have originated in the service.
- (4) The rates under the act are graded from \$6 to \$12, proportioned to the degree of inability to earn a support, and are not affected by rank held.
- (5) A pensioner under prior laws may apply under this one, or a pensioner under this one may apply under other laws, but he can not draw more than one pension for the same period.

Inv. No. 210,401

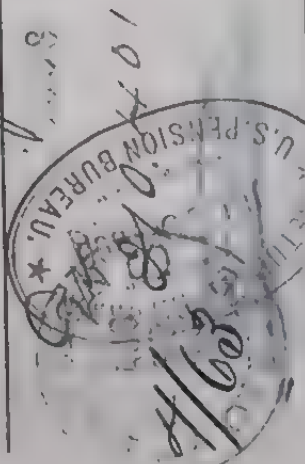
AA. (3-010a.) AA.

### SOLDIER'S APPLICATION.

Name Joseph Goss  
Service 107 Months  
Co. D, 81st Wis. Vol.  
Address Dundee  
Grand du Lac Co. Wis.

Charles J. Donnelly  
City  
Attest.

Attest



Filed by

CHAS. J. DONNELLY & CO.,

WASHINGTON, D. C.

Executed

July 12<sup>th</sup> 1890

F. B. C. (Pension), Put. B., 102 Penna. Ave. Washington, D. C.

CBM

# DECLARATION FOR INCREASE OF PENSION.

Under the Act of June 27, 1890.

THE PENSION CERTIFICATE SHOULD NOT BE FORWARDED WITH THE APPLICATION.

State of Wisconsin  
County of Fond du Lac } ss:

On this 15<sup>th</sup> day of January, A. D. one thousand eight hundred and ninety-seven  
personally appeared before me, a Notary Public

within and for the County and State aforesaid, Joseph Gross  
aged 52 years, late a member of Co. D, 31<sup>st</sup> Regiment, Wis Vol. Inf

a resident of the \_\_\_\_\_ of Campbelleport, County of  
Fond du Lac, State of Wisconsin, who being duly sworn according to

law, declares that he is a pensioner of the United States under the act of June 27, 1890, enrolled at the  
Milwaukee Pension Agency at the rate of eight dollars per month, by

reason of partial inability to earn a support by manual labor, his pension certificate being numbered 809379

That he believes himself to be entitled to an increase of pension on account of the disabilities

heretofore alleged, namely, Varicose veins of both legs, naso pharyngeal  
(Here insert the disabilities alleged in original and subsequent declarations.)

catarrh and disease of rectum.

Also on account of Lamtago. That I served ninety days in the  
(Here insert the disabilities not previously alleged.)  
war of the Rebellion and was honorably discharged.

incurred \_\_\_\_\_

(State when and where disabilities originated, and if wounds or injuries, give circumstances of incurrence.)

For these, he believes that he is entitled to restoration from the  
fact that his pension of \$12<sup>00</sup> per month was illegally reduced  
April 4<sup>th</sup> 1895 without proper examination

That none of said disabilities are due to vicious habits, and that they are to the best of his knowledge and be-  
lief of a permanent character, \_\_\_\_\_

that he appoints The ADJUTANT GENERAL of the STATE of WISCONSIN, MADISON, WIS., County of DANE, State of  
WISCONSIN, his true and lawful attorney to prosecute his claim. That his post-office address is Campbelleport

County of Fond du Lac, State of Wisconsin

Claimant's signature: Joseph Gross

Attest: John W. Engel  
Pat Durand



Also personally appeared John Menzel, residing at Campbellsport Wis  
and Platt Durand, residing at Campbellsport Wis, persons  
whom I certify to be respectable and entitled to credit, and who, being by me duly sworn, say they were pres-  
ent and saw Joseph Gross, the claimant, sign his name (or make  
his mark) to the foregoing declaration; that they have every reason to believe, from the appearance of said  
claimant and their acquaintance with him, that he is the identical person he represents himself to be, and that  
they have no interest in the prosecution of this claim.

John Menzel  
Platt Durand  
(Signatures of witnesses.)

SWORN to and subscribed before me this 15<sup>th</sup> day of January, A. D. 1897,

and I hereby certify that the contents of the above declaration, etc., were fully made  
known and explained to the applicant and witnesses before swearing, including the

[L. S.] words \_\_\_\_\_, erased, and the  
words \_\_\_\_\_, added; and that

I have no interest, direct or indirect, in the prosecution of this claim.

John H. Paas  
(Signature.)  
Notary Public, Wis.  
(Official character.)

N. B.—When duly filled out and attested, return to the Adjutant General, Madison, Wis., who prosecutes, FREE OF  
CHARGE all claims against the U. S. Government, for soldiers or their heirs residing in the State.

CLAIM FOR INCREASE.

ACT OF JUNE 27, 1906.

Joseph Gross, Applicant.

Private Co., I<sup>st</sup> 31<sup>st</sup> Regt.,

Wisconsin Inf. Vols.

(Pension certificate not required.)

Certificate No. 899379

FILED BY  
THE ADJUTANT GENERAL  
OF WISCONSIN,  
STATE AGENT FOR PENSIONS,  
ATTORNEY,

MADISON, WIS.  
RECORDED  
IN 10097  
INDEXED  
Executed January 15<sup>th</sup> 1897.

X To be executed before a Court of Record or by a Notary Public, whose official signature must be verified by his official  
seal, and in case he has none, or if executed before a Justice of the Peace, his signature and official character must be certi-  
fied to by a clerk of a court of record, or a city or county clerk, unless such certificate has already been filed with the Com-  
missioner of Pensions.

THE POST-OFFICE ADDRESS (naming street and number in all large cities) of the applicant, attorney, and  
witnesses, should be embodied in or accompany every application, and all evidence in each claim; and each  
change of residence of said parties, while communicating with the Bureau of Pensions or the pension agents  
should be stated.

Pensions are, by law, exempted from any liability on account of the obligations of the pensioners, and no  
lien upon them can be recognized.

This declaration and any testimony in support of the allegations made therein may be executed before any  
officer authorized to administer oaths for general purposes in the State, city, or county where said officer  
resides.

4-63

# DECLARATION FOR INCREASE OF PENSION.

Under the Act of June 27, 1890.

THE PENSION CERTIFICATE SHOULD NOT BE FORWARDED WITH THE APPLICATION.

State of Wisconsin  
County of Fond du Lac ss:

On this 12<sup>th</sup> day of May, A. D. one thousand eight hundred and ninety-seven  
personally appeared before me, a Notary Public  
within and for the County and State aforesaid, Joseph Goss, aged 53 years,  
late a member of Co. I 3<sup>rd</sup> Regiment, Wis Vol. Inf  
a resident of the City of Cambesport, County of Fond du Lac  
State of Wisconsin, who being duly sworn according to law, declares that he is a  
pensioner of the United States under the act of June 27, 1890, enrolled at the Milwaukee  
Pension Agency at the rate of Eight dollars per month, by reason of partial inability to  
earn a support by manual labor, his pension certificate being numbered 809379

That he believes himself to be entitled to an increase of pension on account of the disabilities heretofore  
alleged, namely, hericore burn of both legs from shrapnel & shrapnel  
(Here insert the disabilities alleged in original and subsequent declarations.)  
decrease of rectum. Partial paralysis of left side of body.

Also on account of Lumbago & Chronic Constipation  
(Here insert the disabilities not previously alleged.)  
Lumbago I have had about two years and Constipation  
incurred at least ten years  
(State when and where disabilities originated, and if wounds or injuries, give circumstances of incurrence.)

That none of said disabilities are due to vicious habits, and that they are to the best of his knowledge and  
belief of a permanent character,

that he appoints Charles Bordman of Madison  
County of Dane State of Wisconsin, his true  
and lawful attorney to prosecute his claim. That his post-office address is Newbassel  
County of Fond du Lac State of Wisconsin

Claimant's signature: Joseph Goss

Attest: E. L. R. R.  
Q. W. B. B.

Attn not filed  
Not June 19/97  
A. Rie



Also personally appeared E. L. Beck, residing at Campbell's Port, Miss  
and Alvin C. Bustaff, residing at New Carroll, Miss, persons  
whom I certify to be respectable and entitled to credit, and who, being by me duly sworn, say they were  
present and saw Joseph Cross, the claimant, sign his name (or make his mark) to the  
foregoing declaration; that they have every reason to believe, from the appearance of said claimant and  
their acquaintance with him, that he is the identical person he represents himself to be; and that they  
have no interest in the prosecution of this claim.

E. L. Beck  
Alvin C. Bustaff  
(Signatures of witnesses.)

Sworn to and subscribed before me this 12<sup>th</sup> day of May, A. D. 1897

[L. S.]

and I hereby certify that the contents of the above declaration, etc., were fully made  
known and explained to the applicant and witnesses before swearing, including the  
words \_\_\_\_\_, erased, and the  
words \_\_\_\_\_, added; and that

I have no interest, direct or indirect, in the prosecution of this claim.

J. M. Pool  
(Signature)  
National Public  
(Official character)  
Thos. H. Sae

(3-011a.)

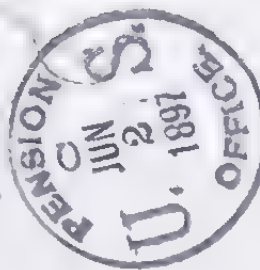
# CLAIM FOR INCREASE.

ACT OF JUNE 27, 1890.

Joseph Cross, Applicant.  
Co. I. 21<sup>st</sup> Regt.,  
Miss Inf. Vols.

(Pension certificate not required.)

Certificate No. 809279



FILED BY

THE POST-OFFICE ADDRESS (naming street and number in all large cities) of the applicant, attorney, and  
witnesses should be embodied in or accompany every application, and all evidence in each claim; and each  
change of residence of said parties, while communicating with the Bureau of Pensions or the pension agents  
should be stated.

Pensions are, by law, exempted from any liability on account of the obligations of the pensioners, and  
no lien upon them can be recognized.

This declaration and any testimony in support of the allegations made therein may be executed before  
any officer authorized to administer oaths for general purposes in the State, city, or county where said  
officer resides.



# Declaration for Increase of Pension.

Under the Act of June 27, 1890.

THE PENSION CERTIFICATE SHOULD NOT BE FORWARDED WITH THE APPLICATION.

State of Wisconsin }  
County of Fond du Lac } ss.

On this 27th day of December, A. D. one thousand eight hundred and ninety-nine  
personally appeared before me, a justice of the peace  
within and for the County and State aforesaid, Joseph Goss  
aged 55 years, late a member of Co. I, 31st Regiment, Wis. Vol He is  
a resident of Campbelloport, County of  
Fond du Lac, State of Wisconsin, who being duly sworn according

to law, declares that he is a pensioner of the United States under the Act of June 27, 1890, enrolled at the  
Milwaukee Pension Agency at the rate of \$ ten dollars per month, by  
reason of partial inability to earn a support by manual labor, his pension certificate being numbered 809,379

That he believes himself to be entitled to an increase of pension on account of the disabili-  
ties heretofore alleged, namely,

(Here insert the disabilities alleged in original and subsequent declarations.)

Diarrhoea, Rheumatism in both legs, Piles, Scurvy, Catarrh of  
Bladder, Swelling of left side & Kidney trouble

Also on account of

(Here insert the disabilities not previously alleged.)

Diarrhoea, Rheumatism, Swelling, Chronic Gonorrhea  
and continued pain in left side  
(State when and where disabilities originated, and if wounds or injuries, give circumstances of incurrence.)

That none of said disabilities are due to his own vicious habits, and that they are to the best of his knowledge  
and belief of a permanent character,

that he appoints THE ADJUTANT GENERAL OF THE STATE OF WISCONSIN, MADISON, WIS., COUNTY OF DANE,  
STATE OF WISCONSIN, his true and lawful attorney to prosecute his claim. That his post-office address is  
Campbelloport County of Fond du Lac, State of  
Wisconsin

Claimant's signature

Joseph Goss

Attest:

Justice of the Peace

Revenue Stamp Not Required  
on Pension Papers.

Do not detach, but put in general  
in Record Div  
Jan 10 1900

Cert for gen ref. called for Jan 12. 1900

State of Wisconsin, County of Fond du Lac. } ss.

Office of Clerk of Circuit Court.

Anton E. Leonard ..... Clerk of the Circuit Court of the County of  
Fond du Lac, in the State of Wisconsin, the said Court being a court of record and having a seal, do  
hereby certify that Geo. W. Johnston  
Esquire, whose name appears subscribed to the annexed instrument, was, at  
the date thereof, a Justice of the Peace of said County, duly elected and quali-  
fied, and empowered by the laws of said State to administer oaths and take  
acknowledgments of deeds; and that to his acts and attestations, as such, full  
faith and credit are and ought to be given in court and out. I further certify  
that I verily believe said signature, purporting to be his, is genuine; and that  
said instrument is executed and acknowledged according to the laws of said  
State.

In Witness Whereof, I have hereunto set my hand and affixed the seal of said Court, at  
Fond du Lac, in said County and State, on this 27 day of ..... A. D. 188.....

Anton E Leonard  
Clerk of Circuit Court, as aforesaid  
By OO McWilliams

Also personally appeared John Loeb, residing at Campbellport  
and Mabel Ode Kirk, residing at Campbellport, persons  
whom I certify to be respectable and entitled to credit, and who, being by me duly sworn, say they were  
present and saw Joseph Goetz, the claimant, sign his name (or make his mark)  
to the foregoing declaration, that they have every reason to believe, from the appearance of said claimant and  
their acquaintance with him, that he is the identical person he represents himself to be, and that they have no  
interest in the prosecution of this claim.

(Signatures of witnesses.)

SWORN to and subscribed before me this 27th day of December, A. D. 1899.

and I hereby certify that the contents of the above declaration, etc., were fully made  
known and explained to the applicant who is respectable and entitled to credit and  
witnesses before swearing, including the words \_\_\_\_\_  
erased, and the words \_\_\_\_\_, added; and that I have  
no interest, direct or indirect, in the prosecution of this claim.

(Signature.)

(Official character.)

N. B.—When duly filled out and attested, return to the Adjutant General, Madison, Wis., who prosecutes,  
free of charge, all claims against the U. S. Government, for soldiers or their heirs residing in the State.

## Claim for Increase

ACT OF JUNE 27, 1890.

Joseph Goetz, Applicant,  
Co., I, 31st Regt.,

Wis. Inf., Vols.

(Pension certificate not required.)  
Certificate No. 809379



Adjutant General

OF WISCONSIN.

STATE AGENT FOR PENSIONS,

ATTORNEY.

MADISON, WISCONSIN.

Executed

X To be executed before a Court of Record or by a Notary Public, whose official signature must be verified by his official seal, and in case he has none, or if executed before a Justice of the Peace, his signature and official character must be certified to by a clerk of a court of record, or a city or county clerk, unless such certificate has already been filed with the Commissioner of Pensions.

THE POST-OFFICE ADDRESS (naming street and number in all large cities) of the applicant, attorney, and witnesses, should be embodied in or accompany every application, and all evidence in each claim; and each change of residence of said parties, while communicating with the Bureau of Pensions or the pension agents should be stated.

Pensions are, by law, exempted from any liability on account of the obligations of the pensioners, and no lien upon them can be recognized.

This declaration and any testimony in support of the allegations made therein may be executed before any officer authorized to administer oaths for general purposes in the State, City, or County where said officer resides.



*Military*

*Reissue* ACT OF FEBRUARY 6, 1907.

✓ Claimant.

✓ P. O.,

✓ County.

✓ State.

✓ Rate, \$

per month, commencing

Rank,

Company,

Regiment,

Joseph Goss

Campbell Port

Fond du Lac,

Wisconsin

12 June 21 1907.

Private

31 Wisconsin Val Inf.

STATE REPRESENTATIVE.

(Order April 25, 1907.)

Name,

P. O.,

The Adjutant General of Wisconsin  
Madison - Wisc.

APPROVAL.

Submitted for

Approved for

Adm. Nov. 2, 1907. E. C. Osborne Examiner.  
Admission.

Age over 62.

Rate \$12 per month

Reissue allowed under Act of Feb 6 1907. Deduct.

Sub-payments and drop name from rolls made at time 2/18/0

November 11, 1907. J. W. Grimes Nov 11, 1907. W. T. Fisher

Legal Reviewer.

Re-Reviewer.

Enlisted

Enlisted

Enlisted

Pensioned at \$

per month, under

Dec 16, 1862 honorably discharged

18 ; honorably discharged

18 ; honorably discharged

Act June 27, 1880.

July 8, 1865

18

18

PRESENT CLAIM, ACT OF FEBRUARY 6, 1907.

Declaration filed

Date of birth alleged,

Age shown by evidence

June 21, 1907

June 15 - 1845

62 1/2 years.

Claimant does write.

Chas. J. H. Dandau M. C.

THE UNITED STATES OF AMERICA  
STATE OF KANSAS

COUNTY OF WYANDOTTE

ss.

Be It Remembered, That at the June Term, A. D, 191 3  
of the District Court of the Twenty-ninth Judicial District of the State of Kansas, sitting within and for  
the County of Wyandotte, in said State begun and held in the City of Kansas City, Kansas, commencing  
on Monday the 2nd day of June A. D. 191 3 Present the  
Honorable E. L. Fischer Judge

R. L. Hinch

Sheriff of Wyandotte County, Kansas, and

R. J. McFarland

Clerk; the following proceedings were had to-wit;

Tuesday July 1st, 1913.

A. D. 191 3

Court met pursuant to adjournment, present as before—

Myra S. Goss

Against

Plaintiff

Joseph Goss

No. 442

Defendant

And now on this 1st day of July A. D. 191 3, this cause comes  
regularly for trial. Plaintiff appears in person and by E. A. Enright, his  
attorney, but defendant comes not, nor answers, nor demurs, but makes default.

And the Court having examined the papers and pleadings filed therein, and having heard the evidence,  
doth find:

I. That said defendant has been duly and legally summoned and notified of the pendency of this action by  
publication herein in the Kansas City Sun a newspaper published  
weekly, continuously and uninterruptedly for fifty two weeks prior  
to the first publication thereof, which service is duly approved  
by the Court.

II. That the allegations contained in plaintiff's petition are true and that plaintiff is entitled to the relief  
prayed for.

III. That plaintiff has been an actual resident in good faith of the State of Kansas for more than one  
year next preceding the filing of the petition herein, and was at the filing thereof, and is now an actual resident  
of Wyandotte County in said State.

IV. That plaintiff and defendant were legally married on the 15th day of  
November A. D. 1910 at Fon Du Lac, Wisconsin.

V. That plaintiff has always performed her duty as the wife of said defendant.

VI. That defendant, disregarding his marriage vows and obligations has been guilty ~~by~~ gross neglect of duty and extreme cruelty as set forth in the petition herein.

It is Therefore Considered, Orderd, Adjudged and Decreed, That said plaintiff be divorced from said defendant, and that the bonds of matrimony heretofore existing between said parties be dissolved, set aside and held for naught, and said parties released from all obligations thereunder. And it is further ordered and adjudged that this decree of divorce shall not become absolute and take effect until the expiration of six months from this date.

It is further ordered and adjudged that plaintiff's maiden name of Myra Scranton be and the same is hereby restored to her.



STATE OF KANSAS

SS:

COUNTY OF WYANDOTTE

I, R. J. McFarland Clerk of the District Court in and for said County, do hereby certify that the within and foregoing is a full, true and correct copy of the Decree of Divorce granted by said Court in the cause therein entitled, as the same appears of record in my office.

In Witness Whereof, I have hereunto set my hand and affixed the seal of said Court, at my office in the City of Kansas City, Kansas, this 3rd day of February A. D. 1919

R. J. McFarland Clerk  
Goldie M. Foster Deputy

No. 422

DISTRICT COURT  
WYANDOTTE COUNTY, KANSAS

Myra S. Goss  
vs.

Joseph Goss

CERTIFIED COPY OF

DECREE OF DIVORCE

E. A. Earlsht

Attorney

Judgment of  
Divorce

FILED BY  
The ADJUTANT GENERAL OF WISCONSIN  
State Agent for Pensions Attorney.  
Madison, Wisconsin.

Forwarded 191

DEC 8 1918

FINANCE  
RECEIVED  
DEC 9 1918  
GROUP 1

Not transferred to  
Group 2.

(Form No. 37.)

NORTHWESTERN BRANCH, NATIONAL HOME FOR DISABLED VOLUNTEER SOLDIERS.

December 4, 1918.

To THE COMMISSIONER OF PENSIONS,

WASHINGTON, D. C.

SIR:

In accordance with instructions of the President of the Board of Managers, National Home for D. V. S., I have the honor to transmit herewith Pension Certificate No. 809-379, of Joseph Goss, deceased, late of I Co., 31st Regiment, Wis. Inf. who died at Northwestern Branch, N.H.D.V.S. on the 3rd day of December, 1918.

Cause of death. Chronic Interstitial Nephritis. Arterio Sclerosis.

Social condition. Married.

The name, address and degree of relationship of his next of kin, so far as indicated by the records of this Home, are as follows:

Margaret R. Goss, 1042 - 26th Street, Milwaukee, Wis. Wife.

Very respectfully,

J. E. [Signature]  
GOVERNOR.

DEPARTMENT OF THE INTERIOR,  
BUREAU OF PENSIONS.

Washington, D. C., Aug. 16. 1915.

Respectfully referred to the  
Adjutant General,  
War Department,  
requesting statement  
showing full military  
and medical history  
of soldier, including  
personal description  
at date of enlistment  
and any unauthorized  
absence.

Inv. Ct. 809.379.  
Joseph Goss.  
I 31 Wis. Inf.

Actg. Comr.

WAR DEPARTMENT,  
THE ADJUTANT GENERAL'S OFFICE,  
WASHINGTON.

Returned to

COMMISSIONER OF PENSIONS.

In the case of

Joseph Goss  
Co. D, 31 Reg't Wis. Inf.,

the records show personal description as follows:

Age 18 height 5 feet, 7 inches,

complexion dark

eyes dark, hair black

place of birth Mass.

occupation farmer.

U. S. M. V. Roll shows

same age (18). No

other age found

No further military

record.

No record of

unauthorized absence.

U. S. PENSION DIVISION  
JAN 20 1915  
CIVIL WAR  
JUL 20 1915

The Adjutant General.



[Redacted]  
Adjutant General's Office,  
Washington, D. C., Oct. 10<sup>th</sup>, 1876.

Sir:

I have the honor to acknowledge the receipt from your Office of application for Pension No. 210.401, and to return it herewith, with such information as is furnished by the files of this Office

It appears from the Rolls on file in this Office that Joseph Gos was enrolled on the 16<sup>th</sup> day of Dec, 1862, at Madison, in Co. I., 31<sup>st</sup> Regiment of Wis. Volunteers, to serve three years or during the war, and mustered into service as a Private on the 16<sup>th</sup> day of Dec, 1862, at Madison, in Co. I., 31<sup>st</sup> Regiment of Wis. Volunteers, to serve three years, or during the war. On the Muster Roll of Co. I., of that Regiment, for the months of from enlistment to June 30, 1865, he is reported private present for duty. Mustered out with Co. July 8<sup>th</sup> 1865. near Louisville Ky. Rolls and Returns furnish no evidence of injury. Regt. and Co. Books furnish no evidence of injury claimed.

*[The following section of the document is crossed out with a large diagonal line.]*

I am, sir, very respectfully,

Your obedient servant,

*[Signature]*

Assistant Adjutant General.

The Commissioner of Pensions,  
Washington, D. C.

*[Signature]*

*[Handwritten initials]*

PENSIONER DROPPED

DEPARTMENT OF THE INTERIOR  
BUREAU OF PENSIONS

DEC 2 1918

191

Certificate No. 809379

Class ACT MAY

Pensioner

Joseph Goss

Soldier

Service

231 Miss Inf

The Commissioner of Pensions.

Sir:

I have the honor to report that the name of  
the above-described pensioner who was last  
paid at \$ 40, to . 1.

has this day been dropped from the roll be-  
cause of.. Dec 2, 1918

JOSEPH GOSS

MILWAUKEE WIS

809379

ACT MAY

1042 26TH ST

Very respectfully,



Chief, Finance Division.

NOTE.—Every name dropped to be thus reported at  
once, and when cause of dropping is death, state date  
of death when known.

Check No 3453658  
 Dated Jan 4 1919 Canceled.

DATE DESTROYED





Act of June 27, 1890.

1897



It is hereby certified That in conformity with the laws of the United States, James E. Smith who was a Private in the 1st Wisconsin Cavalry is entitled to a pension at the rate of Twelve dollars per month, to commence on the fourth day of April one thousand eight hundred and ninety five. This pension is for partial inability to earn a support by manual labor. Issued in lieu of certificate dated September 17, 1892 at correct rate.

Given at the Department of the Interior this Thirteenth day of June, one thousand eight hundred and ninety-five, and of the Independence of the United States of America the one hundred and seventeenth.

Counter-signed

C. C.

Commissioner of Pensions.

Secretary of the Interior.

Former payments covering any portion of the same time to be deducted

That section fifty-seven hundred and forty-five, title fifty-seven of the Revised Statutes of the United States is hereby amended to read as follows:

Sec. 4574.5.—Any pledge, mortgage, sale, assignment, or transfer of any right, claim, or interest in any pension which has been, or may hereafter be, granted, shall be void and of no effect, and any person who shall pledge, or receive as a pledge, mortgage, sale, assignment or transfer of any right, claim, or interest in any pension, or pension certificate, which has been, or may hereafter be granted or issued, or who shall hold the same as collateral security for any debt, or promise, or upon any pretext of such security, or promise, shall be guilty of a misdemeanor, and upon conviction thereof shall be fined in a sum not exceeding one hundred dollars and the costs of the prosecution; and any person who shall retain the certificate of a pensioner and refuse to surrender the same upon the demand of the Commissioner of Pensions, or a United States pension agent, or any other person, authorized by the Commissioner of Pensions, or the pensioner, to receive the same shall be guilty of a misdemeanor, and upon conviction thereof shall be fined in a sum not exceeding one hundred dollars and the costs of the prosecution.

—Approved February 28, 1883.

No. 809379.  
PENSION CERTIFICATE OF

*John L. Jones*  
—(Payable Quarterly)—  
by the  
"U. S. Pension Agent  
at *Diagon Rec.*  
L. L. R."

*John L. Jones*  
Clerk.

State of Wisconsin :  
County of Dane : 33

I, L. W. Hutchcroft, Statistician for the State  
Bureau of Vital Statistics, do hereby certify that the copy  
of the death certificate herewith presented has been compared  
by me with the original on file in this office and that the  
same is a true copy thereof.

*L. W. Hutchcroft.*

---

Statistician



Every item of information should be carefully supplied. AGE should be stated EXACTLY. Physicians should state CAUSE OF DEATH in plain terms, so that it may be properly classified. Exact statement of occupation is very important. See instructions on inside of cover.

N. B. Do not send this certificate to the register of deeds. It should be returned to the local registrar of the town or village, or the health officer of the city where death occurred and by him forwarded to the State Bureau of Vital Statistics with the regular monthly reports.

The death certificate properly filled out may be filed by the undertaker with any local registrar in the state and a burial permit obtained from such registrar. The registrar who receives the certificate, if the death did not occur in that district, must sign the certificate as sub-registrar and forward at once to the registrar of the district where death occurred for which a fee of 10c is paid.

1 PLACE OF DEATH  
County Milwaukee  
Township Wauwatosa  
or  
Village \_\_\_\_\_  
or  
City \_\_\_\_\_  
(If death occurred in a hospital or institution give its NAME instead of street and number.)

STATE OF WISCONSIN  
Department of Health—Bureau of Vital Statistics

## ORIGINAL CERTIFICATE OF DEATH

Registered No. \_\_\_\_\_

## 2 FULL NAME

(a) Residence. No. \_\_\_\_\_ St. \_\_\_\_\_ Ward. \_\_\_\_\_  
(Usual place of abode)  
Length of residence in City or town where death occurred yrs. mos. ds. How long in U. S., if of foreign birth? yrs. mos. ds. (If nonresident give city or town and state)

## PERSONAL AND STATISTICAL PARTICULARS

3 SEX Male 4 COLOR OR RACE White 5 SINGLE, MARRIED, WIDOWED OR DIVORCED (Write the word) Married

5a If married, widowed, or divorced  
HUSBAND of  
(or) WIFE of

6 DATE OF BIRTH (month, day and year)

7 AGE Years Months Days If LESS than 1  
74 day \_\_\_\_\_ hr. \_\_\_\_\_  
or \_\_\_\_\_ min.

8 OCCUPATION

(a) Trade, profession, or particular kind of work (former) Stone Cutter  
(b) General nature of industry, business, or establishment in which employed or (employer) \_\_\_\_\_

9 BIRTHPLACE (State or country)

Wisconsin

10 NAME OF FATHER

11 BIRTHPLACE OF FATHER (State or country)

12 MAIDEN NAME OF MOTHER

13 BIRTHPLACE OF MOTHER (State or country)

14 THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE

(Informant) Margaret J. King, Prop. Clerk  
(Address) National Home, Wisconsin

15 Filed Dec. 12 1918 Edward J. Gask  
REGISTRAR  
Filed \_\_\_\_\_ 1918

Sub-REGISTRAR

## MEDICAL CERTIFICATE OF DEATH

16 DATE OF DEATH

Dec 3, 1918  
(Month) (Day) (Year)

17 I HEREBY CERTIFY, That I attended deceased from Nov. 24, 1918, to Dec. 3, 1918 that I last saw him alive on Dec. 3, 1918 and that death occurred on the date stated above, at 10:10 a.m.

The CAUSE OF DEATH\* was as follows:

Chronic Interstitial Nephritis

(Duration) \_\_\_\_\_ yrs. \_\_\_\_\_ mos. \_\_\_\_\_ dys.  
Contributory arteriosclerosis  
(SECONDARY)  
(Duration) 4 yrs. \_\_\_\_\_ mos. \_\_\_\_\_ dys.

18 Where was disease contracted if not at place of death?

Did an operation precede death? \_\_\_\_\_ Date of \_\_\_\_\_

Was there an autopsy? \_\_\_\_\_

What test confirmed diagnosis? \_\_\_\_\_

(Signed) Andrew J. Jones, M. D.  
\_\_\_\_\_, 1918 (Address) \_\_\_\_\_

\*State the disease causing death, or in deaths from VIOLENT CAUSES state (1) means and nature of injury; and (2) whether accidental, suicidal, or homicidal. (See reverse side for additional space.)

19 PLACE OF BURIAL, CREMATION OR REMOVAL

DATE OF BURIAL

Natl Home, Wis. Dec. 5, 1918

20 UNDERTAKER

ADDRESS

Hospital Steward Natl Home, Wis.

State of Wisconsin :  
: 38  
County of Dane :

I, L. W. Hutchcroft, Statistician for the State  
Bureau of Vital Statistics, do hereby certify that the copy  
of the death certificate herewith presented has been compared  
by me with the original on file in this office and that the  
same is a true copy thereof.

L. W. Hutchcroft.

Statistician

FILED BY

The ADJUTANT GENERAL OF WISCONSIN

State Agent for Pensions Attorney,  
Madison, Wisconsin.

Forwarded FEB 3 - 1919 191

MARGIN RESERVED FOR BINDING

WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD

Every item of information should be carefully supplied. AGE should be stated EXACTLY. Physicians should state CAUSE OF DEATH in plain terms, so that it may be properly classified. Exact statement of occupation is very important. See instructions on inside of cover. N. B. Do not send this certificate to the registrar of deeds. It should be returned to the local registrar of the town, or village, or the health officer of the city where death occurred and by him forwarded to the State Bureau of Vital Statistics with the regular monthly reports. The death certificate properly filled out may be filed by the undertaker with any local registrar in the state and a burial permit obtained from such registrar. The registrar who receives the certificate, if the death did not occur in that district, must sign the certificate as sub-registrar and forward at once to the registrar of the district where death occurred for which a fee of 10¢ is paid.

1 PLACE OF DEATH		STATE OF WISCONSIN	
County <u>Franklin</u>		Department of Health—Bureau of Vital Statistics	
Township <u>Campbellsport</u>		ORIGINAL CERTIFICATE OF DEATH	
Village <u>Campbellsport</u>		Registered No. _____	
City _____ (No. _____) St. _____ Ward _____			
(If death occurred in a hospital or institution give its NAME instead of street and number.)			
2 FULL NAME <u>Annie Goss</u>			
(a) Residence. No. _____ St. _____ Ward _____			
(Usual place of abode)		(If nonresident give city or town and state)	
Length of residence in City or town where death occurred yrs. mos. ds.		How long in U. S., if of foreign birth? yrs. mos. ds.	
PERSONAL AND STATISTICAL PARTICULARS			
3 SEX <u>Female</u>	4 COLOR OR RACE <u>White</u>	5 SINGLE, MARRIED, WIDOWED OR DIVORCED (Write the word) <u>Married</u>	
5a If married, widowed, or divorced HUSBAND of (or) WIFE of _____			
6 DATE OF BIRTH (month, day and year) _____			
7 AGE	Years	Months	Days
	<u>56</u>	<u>10</u>	<u>25</u>
If LESS than 1 day _____ hrs or _____ min.			
8 OCCUPATION			
(a) Trade, profession, or particular kind of work <u>Invalid for years</u>			
(b) General nature of industry, business, or establishment in which employed or (employer) _____			
9 BIRTHPLACE (State or country) <u>New York</u>			
PARENTS	10 NAME OF FATHER <u>Michael Murray</u>		
	11 BIRTHPLACE OF FATHER (State or country) <u>Ireland</u>		
	12 MAIDEN NAME OF MOTHER <u>Ecclesia Garity</u>		
	13 BIRTHPLACE OF MOTHER (State or country) <u>Ireland</u>		
14 THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE			
(Informant) <u>Joseph Goss</u>			
(Address) <u>Campbellsport, W. I.</u>			
15	Filed <u>5-18</u> 191 <u>0</u>	<u>B. F. Shaw</u>	
		REGISTRAR	
	Filed _____ 191 <u>0</u>	SUB-REGISTRAR	
MEDICAL CERTIFICATE OF DEATH			
16 DATE OF DEATH <u>Aug. 6</u> 191 <u>0</u>			
(Month) (Day) (Year)			
17 I HEREBY CERTIFY, That I attended deceased from <u>Feb. 1</u> 191 <u>0</u> , to <u>Aug. 6</u> 191 <u>0</u>			
that I last saw him alive on <u>Aug. 6</u> 191 <u>0</u>			
and that death occurred on the date stated above, at <u>3:30 P.</u>			
The CAUSE OF DEATH* was as follows:			
<u>Pneumonia Pulmonalis</u>			
(Duration) _____ yrs. _____ mos. _____ dys.			
Contributory <u>Arthritis Rheumatica</u>			
(SECONDARY) (Duration) _____ yrs. _____ mos. _____ dys.			
18 Where was disease contracted if not at place of death? _____			
Did an operation precede death? _____ Date of _____			
Was there an autopsy? _____			
What test confirmed diagnosis? _____			
(Signed) <u>M. R. J. Thompson</u> M. D.			
<u>Aug. 6</u> 191 <u>0</u> (Address) <u>Campbellsport</u>			
*State the disease causing death, or in deaths from VIOLENT CAUSES state (1) means and nature of injury, and (2) whether accidental, suicidal, or homicidal. (See reverse side for additional space.)			
19 PLACE OF BURIAL, CREMATION OR REMOVAL <u>Campbellsport Union Burying</u>		DATE OF BURIAL <u>Aug. 9</u> 191 <u>0</u>	
20 UNDERTAKER <u>Gilbert Lim</u>		ADDRESS <u>Campbellsport</u>	



St. Doniface's Church

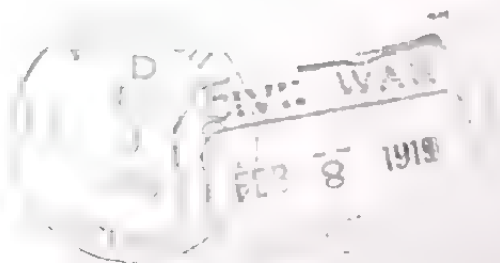
987 Eleventh Street

Milwaukee

REV. H. T. STAMPER  
PASTOR

Jan 31 1919

This is to certify, that Jos. Bonn  
and Margaret Huston were  
united in the Holy bonds of marriage  
Jan 14. 1914 witnesses were Josephine Bonn  
& Isabel Dick. H. T. Stamper.



1891

Feb 11

19

STATE OF WISCONSIN  
THE ADJUTANT GENERAL'S OFFICE  
MADISON

, 191 .

Commissioner of Pensions,  
Washington, D.C.

Sir:-

Mr. Joseph Goss late a Private of  
Co. A, 31<sup>st</sup> Regt. Wis Vol Inf  
pensioned by certificate No. 809 379 has reached the  
age of 70 years and is entitled to an in-  
creased rate of pension under the Act of May 11, 1912, in  
accordance with length of service and age.

Was enrolled at Madison under the name of  
Joseph Goss on the 16 day of  
December 1862.

Was honorably discharged at near Louisville Ky  
on the 8<sup>th</sup> day of July, 1865. Was  
born June 15 1845.

Post office address is 205 Dr. Francis <sup>Madison</sup>, County  
of Dane, State of Wisconsin.

Very respectfully,

Joseph Goss  
pensioners signature in full.



No. 15 Enc Pension Claims  
No. 809,379  
Joseph Cross  
Book of Claims  
Date Feb Co. "4" 31 Reg.  
Ans Exp

FILED BY  
THE ADJUTANT GENERAL  
OF WISCONSIN,  
State Agent for Pensions, Attorney  
Madison, Wisconsin.

Recorded 8-6 1745-

Div.

E. C. H. Ex'r.

## Department of the Interior,

## BUREAU OF PENSIONS,

Washington, D. C., October 7, 1897

Sir:

Will you kindly answer, at your earliest convenience, the questions enumerated below? The information is requested for future use, and it may be of great value to your family.

Very respectfully,

Mr. Joseph Goss  
New Castle,  
Wisconsin

Commissioner

No. 1. Are you a married man? If so, please state your wife's full name, and her maiden name.

Answer: I have a wife and her maiden name is Elizabeth Goss.

No. 2. When, where, and by whom were you married? Answer:

Answer: I was married at New Castle, Wisconsin, on the 10th of June, 1874.

No. 3. What record of marriage exists? Answer:

Answer: A marriage license was issued by the County Clerk of New Castle, Wisconsin, on the 10th of June, 1874.

No. 4. Were you previously married? If so, please state the name of your former wife and the date and place of her death or divorce. Answer:

Answer: No.

No. 5. Have you any children living? If so, please state their names and the dates of their birth. Answer:

Answer: I have three children: Elizabeth Goss, born June 10, 1875; John Goss, born June 10, 1876; and Mary Goss, born June 10, 1877. All three are living.

Date of reply,

1897.

Certificate No. 009379

Name, Joseph Goss

## Department of the Interior,

## BUREAU OF PENSIONS,

Washington, D. C., January 15, 1898.

SIR:

In forwarding to the pension agent the executed voucher for your next quarterly payment please favor me by returning this circular to him with replies to the questions enumerated below.

Very respectfully,



Commissioner of Pensions.

First. Are you married? If so, please state your wife's full name and her maiden name.

Answer. Yes. Annie Goss. Annie Murray

Second. When, where, and by whom were you married?

Answer. May 11<sup>th</sup> 1874. Cascade. Elzygon. L. W. W. Rev. Nelson Hass

Third. What record of marriage exists?

Answer. Certificate from Elzygon. who performed ceremony.

Fourth. Were you previously married? If so, please state the name of your former wife and the date and place of her death or divorce.

Answer. No

Fifth. Have you any children living? If so, please state their names and the dates of their birth.

Answer. Celia May 26<sup>th</sup> 1876. Mary Jan 3<sup>rd</sup> 1878. Calbraime April 6<sup>th</sup> 1880  
Edward May 21<sup>st</sup> 1883. Lurline July 6<sup>th</sup> 1883  
Joseph 16. Feb 3<sup>rd</sup> 1891. Leona Aug 12<sup>th</sup> 1894



(Signature.)

Date of reply, 4<sup>th</sup>, 1898

53011750ml-88



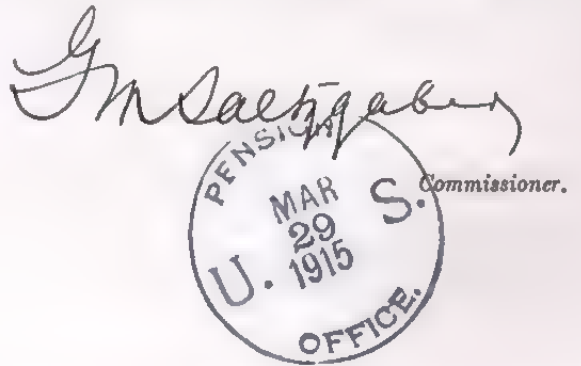
DEPARTMENT OF THE INTERIOR  
BUREAU OF PENSIONS

WASHINGTON, D. C., January 2, 1915.

SIR: Please answer, at your earliest convenience, the questions enumerated below. The information is requested for future use, and it may be of great value to your widow or children. Use the inclosed envelope, which requires no stamp.

Very respectfully,

JOSEPH GOSS,  
MILWAUKEE WIS  
809379  
482 MURRAY AVE



- No. 1. Date and place of birth? *Answer. Sterling Massachusetts June 4<sup>th</sup> 1845*  
The name of organizations in which you served? *Answer. Company 2. 31<sup>st</sup> Wis. Vol. Inf.*
- No. 2. What was your post office at enlistment? *Answer. Madison Wisconsin*
- No. 3. State your wife's full name and her maiden name. *Answer. Margaret R. Metz*
- No. 4. When, where, and by whom were you married? *Answer. Indiana Penn., Justice Beach*
- No. 5. Is there any official or church record of your marriage? *Yes.*  
If so, where? *Answer. Indiana Penn.*
- No. 6. Were you previously married? If so, state the name of your former wife, the date of the marriage, and the date and place of her death or divorce. If there was more than one previous marriage, let your answer include all former wives. *Answer. Yes.*  
*Annie Murray Mar 11<sup>th</sup> 1874 - died August 10, 1910*  
*died at Camp Bellsport Wis.*
- No. 7. If your present wife was married before her marriage to you, state the name of her former husband, the date of such marriage, and the date and place of his death or divorce, and state whether he ever rendered any military or naval service, and, if so, give name of the organization in which he served. If she was married more than once before her marriage to you, let your answer include all former husbands. *Answer. William W. Huston May 2<sup>nd</sup> 1878*  
*died Jan 20, 1908. Black Lick Township Pennsylvania*  
*Never Was a Soldier*
- No. 8. Are you now living with your wife, or has there been a separation? *Answer. Yes.*
- No. 9. State the names and dates of birth of all your children, living or dead. *Answer.*  
*Cecilia Goss May 25, 1876. Mary Goss Jan 3<sup>rd</sup> 1878. Catherine Goss*  
*April 6<sup>th</sup> 1880. Edward N. Goss May 21, 1883. Gertrude Goss July 6,*  
*1885. Leonie E. Goss Sept-21, 1904. Joseph L. Goss Feb. 8<sup>th</sup> 1891*

Date .....

(Signature)

*Joseph Goss*

## DECLARATION OF A WIDOW FOR ACCRUED PENSION.

STATE OF Wisconsin  
 COUNTY OF Milwaukee ss:

On this 30<sup>th</sup> day of December A. D. one thousand nine hundred and eighteen  
 personally appeared before me, a Notary Public within and for the county and  
 State aforesaid, Margaret R. Goss, aged 57 years,  
 a resident of Milwaukee County of Milwaukee,  
 State of Wisconsin, who being duly sworn according to law, makes the following declaration  
 in order to obtain the pension which had accrued to her husband, named below, at the time of his death.

That she is the widow of Joseph Goss  
 who served as Private in Company "I" 31<sup>st</sup> Wisconsin Infantry  
(State rank and designation of organization or name of vessel.)  
 and who was a pensioner of the United States by certificate No. 809,379, on the roll of the Pension  
 Agency at Washington; that the last payment of his pension was made to  
 the 4<sup>th</sup> day of October, 1918; that he died on the 2<sup>nd</sup> day of December, 1918

That she was married under the name of Margaret R. Huston to said pensioner  
 at Indiana Pa. on the 8<sup>th</sup> day of November, 1912  
 by A. Crossman, J. P.; that there was no legal barrier to the marriage;  
~~husband having died January 20, 1917~~  
 that she had never been previously married; that the soldier had never been previously married.  
Wife having died July 10<sup>th</sup> 1910  
(If there was a prior marriage of either, the date and place of death or divorce of former consort or consorts should be stated.)

That her post-office address is 1042 - 26<sup>th</sup> St. City of Milwaukee  
 County of Milwaukee State of Wisconsin

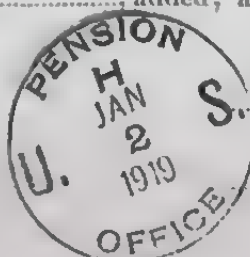
Attest: (1) Josephine Lange  
 (2) Ruth Goss Margaret R. Goss  
(Applicant's signature.)

And personally appeared Josephine Lange, residing  
 at Milwaukee, Wis., and Ruth Goss  
 residing at Milwaukee, Wis., persons whom I certify to be respectable and entitled  
 to credit, and who, being by me duly sworn, say they were present and saw Margaret R. Goss  
 the claimant, sign her name (or make her mark) to the foregoing declaration; and that they have every reason  
 to believe, from the appearance of said claimant and their acquaintance with her of two months  
years and two years, respectively, that she is the identical person she represents herself to be; and  
 that they have no interest in the prosecution of this claim.

Josephine Lange  
Ruth Goss  
(Signatures of witnesses.)

Subscribed and sworn to before me this 30<sup>th</sup> day of December A. D. 1918  
 and I hereby certify that the contents of the above declaration, etc., were fully made known and explained to  
 the applicant and witnesses before swearing, including the words years erased,  
 and the words two months added; and that I have no interest, direct or indirect,  
 in the prosecution of this claim.

[L. S.]



Fred O. Mueller  
(Signature.)

NOTARY PUBLIC,

(Official Certificate)

JAN 6 1919



# May 11/12 # 809379 ACCRUED PENSION.

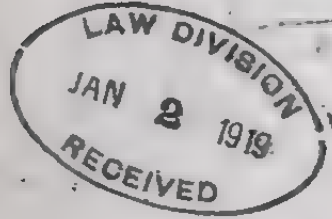
WIDOW'S APPLICATION. *B*

Applicant, \_\_\_\_\_

Soldier, *Joseph Goes*

Service, *D 31 War Def*

DROPPED



## PAYMENT OF ACCRUED PENSIONS.

AN ACT to provide for the payment of accrued pensions in certain cases.

*Be it enacted, etc.,* That from and after the twenty-eighth day of September, eighteen hundred and ninety-two, the accrued pension to the date of the death of any pensioner, or of any person entitled to a pension having an application therefor pending, and whether a certificate therefor shall issue prior or subsequent to the death of such person, shall, in the case of a person pensioned, or applying for pension, on account of his disabilities or service, be paid, first, to his widow; second, if there is no widow, to his child or children under the age of sixteen years at his death; third, in case of a widow, to her minor children under the age of sixteen years at her death. Such accrued pension shall not be considered a part of the assets of the estate of such deceased person, nor be liable for the payment of the debts of said estate in any case whatsoever, but shall inure to the sole and exclusive benefit of the widow or children. And if no widow or child survive such pensioner, and in the case of his last surviving child who was such minor at his death, and in case of a dependent mother, father, sister, or brother, no payment whatsoever of their accrued pension shall be made or allowed except so much as may be necessary to reimburse the person who bore the expense of their last sickness and burial, if they did not leave sufficient assets to meet such expense. And the mailing of a pension check, drawn by a pension agent in payment of a pension due, to the address of a pensioner, shall constitute payment in the event of the death of a pensioner subsequent to the execution of the voucher therefor. And all prior laws relating to the payment of accrued pension are hereby repealed.

Approved March 2, 1895.

## INSTRUCTIONS.

Declaration and evidence in support thereof to be executed before some officer of a court of record having custody of its seal, a notary public, justice of the peace, or other officer authorized to administer oaths for general purposes. If such officer is not required by law to have and use a seal, his official character, signature, and term of office must be certified by the proper State, county, or city officer under his official seal, unless such a certificate has been filed in the Bureau of Pensions for general reference.

The evidence indicated below should accompany the declaration:

1. A verified copy of the public record, or, if no such record exists, the testimony of the attending physician or of credible witnesses, showing the date of the soldier's death.
2. A verified copy of the public or church record of the claimant's marriage to the soldier; or, if no such record exists, the affidavit of the person who performed the ceremony; or, if that can not be procured, the testimony of credible persons who were present at the marriage, showing the date thereof.
3. If the claimant or soldier had been previously married, the death or divorce of the former husband or wife should be proved: In case of death, by a verified copy of the public record, or, if no such record exists, by the testimony of credible witnesses; in case of divorce, by a certified copy of the decree of the court. If there was no prior marriage of either party, the fact should be shown by the testimony of credible witnesses.
4. Testimony of credible witnesses showing whether the claimant lived with the soldier to the date of his death; and whether she was divorced from him.

*Copies of records should be attested by the officer having custody thereof; and if he has no seal by which to authenticate his signature, the attestation should be under oath.*

*Witnesses must state their post-office addresses, ages, and means of knowledge of the facts to which they testify, and write their names immediately after their statements, leaving no blank space over their signatures; and it should appear in the jurats that they knew the contents of their affidavits, and that erasures or alterations, if any, were made before the oath was administered.*

U-576

PER

CHIEF, LAW DIVISION.

DECLARATION ACCEPTED AS  
A CLAIM UNDER THE ACT OF  
MARCH 2, 1895.

JAN 6 1919



Act of February 6th, 1907.

DECLARATION FOR INVALID PENSION.

State of Wisconsin,  
County of Fond du Lac } ss.

On this... 17... day of... June... A. D. one thousand nine hundred and... Seven... personally appeared before me, a... Notary Public... within and for the county and State aforesaid, Joseph Cass, who, being duly sworn according to law, declares that he is... 62... years of age, and a resident of... Campbells Port... county of... Fond du Lac... State of... Wisconsin... and that he is the identical person who was ENROLLED at... Madison... misc... under the name of... Joseph Cass... on the... 16th... day of... December... 18... 62... as a... Private... in... Co I 31st R Wis Vol Inf...  
[Here state rank, and company, and regiment in the Army, or vessel, if in the Navy]

in the service of the United States, in the war of the rebellion, and served at least ninety days and was HONORABLY DISCHARGED at... near Louisville 187... on the... 8th... day of... July... 18... 65... That he also served...  
[Here give a complete statement of all other services, if any.]

That he was not employed in the military or naval service of the United States otherwise than as stated above. That his personal description at enlistment was as follows: Height... 5... feet... 5... inches; complexion, Dark; color of eyes... Dark; color of hair, Black; that his occupation was... farmer...; that he was born... June 15th... 18... 45... at... Sterling Mass...  
That his several places of residence since leaving the service have been as follows: Madison Wis  
Milwaukee Wis Dundee Wis Campbells Port, Wis  
(State date of each change, as nearly as possible.)

That he is... a pensioner under Certificate No. 809379 That he has... heretofore applied for pension...  
[If a pensioner, the certificate number only need be given. If not, give the number of the former application, if one was made.]

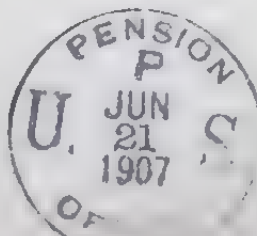
That he makes this declaration for the purpose of being placed on the pension roll of the United States under the provisions of the act of Feb. 6, 1907.

That his POST-OFFICE ADDRESS is... Campbells Port... county of... Fond du Lac... State of... Wisconsin...

That he hereby appoints The Adjutant General of Wisconsin, Madison, Wisconsin, his true and lawful attorney to prosecute his claim without fee.

Attest: (1) J. T. Naughton  
(2) Wm. Wardlaw

Joseph Cass  
(Claimant's signature in full.)







ACT OF MAY 11, 1912.

# DECLARATION FOR PENSION.

THE PENSION CERTIFICATE SHOULD NOT BE FORWARDED WITH THE APPLICATION.

State of Wisconsin  
County of Grand du Lac } ss.

On this 20<sup>th</sup> day of May, A. D. one thousand nine hundred and twelve, personally appeared before me, a Notary Public within and for the county and State aforesaid, Joseph Goss, who, being duly sworn according to law, declares that he is 66 years of age, and a resident of Campbellsport county of Grand du Lac, State of Wisconsin; and that he is the identical person who was ENROLLED at Madison Wisconsin under the name of Joseph Goss, on the 16<sup>th</sup> day of Dec., 1862 as a Private, in Company I, 21<sup>st</sup> Wis. Vol. Infantry  
(Here state rank, and company and regiment in the Army; or vessels, if in the Navy.)

in the service of the United States, in the Civil war, and WAS HONORABLY DISCHARGED at near Louisville Ky, on the 8<sup>th</sup> day of July, 1865  
That he also served none  
(Here give a complete statement of all other services, if any.)

That he was not employed in the military or naval service of the United States otherwise than as stated above. That his personal description at enlistment was as follows: Height, 5 feet 5 1/2 inches; complexion, dark; color of eyes, Brown; color of hair, black; that his occupation was farmer; that he was born Shirling, Mass., 18June 15<sup>th</sup> 1845

That his several places of residence since leaving the service have been as follows: Madison Wis., Milwaukee Wis., Grand du Lac Wis., Campbellsport Wis.  
(State date of each change as nearly as possible.)

That he is a pensioner under certificate No. 809279

That he has not applied for pension under original No. \_\_\_\_\_

That he makes this declaration for the purpose of being placed on the pension roll of the United States under the provisions of the act of May 11, 1912.

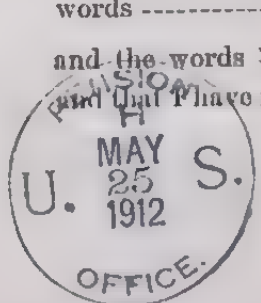
That his post-office address is Campbellsport, county of Grand du Lac, State of Wisconsin

Attest: (1) Herman Traas  
(2) Jacob S. Meyer

Joseph Goss  
(Claimant's signature in full.)

SUBSCRIBED and sworn to before me this 20<sup>th</sup> day of May, A. D., 1912, and I hereby certify that the contents of the above declaration, etc., were fully made known and explained to the applicant before swearing, including the words \_\_\_\_\_, erased,

[L. S.] \_\_\_\_\_ and the words \_\_\_\_\_, added; and that I have no interest, direct or indirect, in the prosecution of this claim.



Validity as to execution  
S. A. Cuddy,  
Chief, Law Division  
per ALP

John H. Traas  
(Signature.)  
Notary Public  
(Official Character.)



ACT OF MAY 11, 1912.

# CLAIM FOR PENSION.

Certificate No. 809279

Name, Joseph J. Ford

Service, \_\_\_\_\_

## INSTRUCTIONS.

This form may be used for original pension or increase of pension.

Declaration and testimony in support of same to be executed before some officer of a court of record having custody of its seal, a notary public, justice of the peace, or other officer authorized to administer oaths for general purposes. If such officer is not required by law to have and use a seal, his official character, signature, and term of office must be certified by the proper State, county, or city officer under his official seal, unless such certificate has been filed in the Bureau of Pensions for general reference.

Published by The National Tribune, Washington, D. C.

## AN ACT

GRANTING PENSIONS TO CERTAIN ENLISTED MEN, SOLDIERS, AND OFFICERS WHO SERVED IN THE CIVIL WAR AND THE WAR WITH MEXICO.

*Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled:*

That any person who served ninety days or more in the military or naval service of the United States during the late Civil War, who has been honorably discharged therefrom, and who has reached the age of sixty-two years or over, shall, upon making proof of such facts, according to such rules and regulations as the Secretary of the Interior may provide, be placed upon the pension roll and be entitled to receive a pension as follows: In case such person has reached the age of sixty-two years and served ninety days, thirteen dollars per month; six months, thirteen dollars and fifty cents per month; one year, fourteen dollars per month; one and a half years, fourteen dollars and fifty cents per month; two years, fifteen dollars per month; two and a half years, fifteen dollars and fifty cents per month; three years or over, sixteen dollars per month; one and a half years, sixteen dollars and fifty cents per month; one year, sixteen dollars per month; six months, fifteen dollars per month; six months, fifteen dollars and fifty cents per month; one year, sixteen dollars per month; one and a half years, sixteen dollars and fifty cents per month; two years, seventeen dollars per month; two and a half years, seventeen dollars and fifty cents per month; three years or over, eighteen dollars per month. In case such person has reached the age of seventy years and served ninety days, eighteen dollars per month; six months, nineteen dollars per month; one year, twenty dollars per month; one and a half years, twenty dollars and fifty cents per month; two years, twenty-one dollars per month; two and a half years, twenty-one dollars and fifty cents per month; three years or over, twenty-two dollars per month. In case such person has reached the age of seventy-five years and served ninety days, twenty-one dollars per month; six months, twenty-two dollars and fifty cents per month; one year, twenty-three dollars per month; one and a half years, twenty-three dollars and fifty cents per month; two years, twenty-four dollars per month; two and a half years, twenty-four dollars and fifty cents per month; three years or over, twenty-five dollars per month. In case such person has reached the age of eighty years and served ninety days, twenty-four dollars per month; six months, twenty-five dollars and fifty cents per month; one year, twenty-six dollars per month; one and a half years, twenty-six dollars and fifty cents per month; two years, twenty-seven dollars per month; two and a half years, twenty-seven dollars and fifty cents per month; three years or over, twenty-eight dollars per month. That any person who served in the military or naval service of the United States during the civil war and received an honorable discharge, and who was wounded in battle or in line of duty and is now unfit for manual labor by reason thereof, or who from disease or other causes incurred in line of duty resulting in his disability is now unable to perform manual labor, shall be paid the maximum pension under this act, to wit, thirty dollars per month, without regard to length of service or age.

That any person who has served sixty days or more in the military or naval service of the United States in the War with Mexico and has been honorably discharged therefrom, shall, upon making like proof of such service, be entitled to receive a pension of thirty dollars per month.

All of the aforesaid pensions shall commence from the date of filing of the applications in the Bureau of Pensions after the passage and approval of this act: Provided, That pensioners who are sixty-two years of age or over, and who are now receiving pensions under existing laws, or whose claims are pending in the Bureau of Pensions, may, by application to the Commissioner of Pensions, in such form as he may prescribe, receive the benefits of this act; and nothing herein contained shall prevent any pensioner or person entitled to a pension from prosecuting his claim and receiving a pension under any other general or special act: Provided, That no person shall receive a pension under any other law at the same time or for the same period that he is receiving a pension under the provisions of this act: Provided further, That no person who is now receiving or shall hereafter receive a greater pension under any other general or special law than he would be entitled to receive under the provisions herein shall be pensionable under this act.

Sec. 2. That rank in the service shall not be considered in applications filed hereunder.

Sec. 3. That no pension attorney, claim agent, or other person shall be entitled to receive any compensation for services rendered in presenting any claim to the Bureau of Pensions, or securing any pension, under this act, except in applications for original pension by persons who have not heretofore received a pension.

Sec. 4. That the benefits of this act shall include any person who served during the late Civil War, or in the War with Mexico, and who is now or may hereafter become entitled to pension under the acts of June twenty-seventh, eighteen hundred and ninety; February fifteenth, eighteen hundred and ninety-five, and the joint resolutions of July first, nineteen hundred and two, and June twenty-eighth, nineteen hundred and six, or the acts of January twenty-ninth, eighteen hundred and eighty-seven; March third, eighteen hundred and ninety-one, and February seventeenth, eighteen hundred and ninety-seven.

Sec. 5. That it shall be the duty of the Commissioner of Pensions, as each application for pension under this act is adjudicated, to cause to be kept a record showing the name and length of service of each claimant, the monthly rate of payment granted to or received by him, and the county and State of his residence; and shall at the end of the fiscal year nineteen hundred and fourteen tabulate the record so obtained by States and countries, and shall furnish certified copies thereof upon request and the payment of such fee therefor as is provided by law for certified copies of records in the executive departments.

APPROVED: May 11, 1912.

# Adjutant General's Office, Wisconsin—Pension Division

## GENERAL AFFIDAVIT FOR ANY PURPOSE

In the matter of the Wid. Accrued Pension Claim Margaret R. Goss,  
No. \_\_\_\_\_ account of Joseph Goss,  
(Here give Soldier's Name.)  
late a \_\_\_\_\_, of Co. "I," 31st Regiment Wis. Inft.  
(Grade)  
State of Wisconsin, County of Dane, ss.

On this 17th day of January, A. D. 1919, personally appeared before me  
Margaret R. Goss, a respectable citizen, entitled to credit, who  
being duly sworn, says that she is a resident of Milwaukee, in the County of  
Milwaukee, State of Wisconsin, her postoffice  
address is 1042 - 26th Street, and is 57 years old; she  
declares that she has no interest in this claim. Affiant testified as follows:-

WITNESSES MUST STATE THEIR MEANS OF KNOWLEDGE OF facts to which they  
testify, and write their names immediately after their statements, leaving no blank space  
over their signatures.  
When affiant signs by mark two witnesses attest.  
Jurat and Seal of Magistrate on other side.

That she is the widow of the soldier above named and makes  
this statement in support of a claim for the accrued pension due  
the soldier at his death.

That she had been previously married to one William Huston  
May 21, - 1879, and who died in the year 1907. after the death  
of the said William Huston, this claimant did not again marry  
until she married the soldier Joseph Goss, November 8-  
1912. at Indiana, Penn. with whom she lived as his wife  
from the date of their marriage until his death and was  
never divorced.

The said soldier Joseph Goss, fell in Milwaukee, and  
was badly injured, and was taken to the soldiers Home at  
Milwaukee, on the 29th day of November 1918, where he died  
December 3d - 1918 four days later.

Affiant further states that her former husband William  
Huston did not serve in the army or navy of the U. S. States  
during the Civil War.

Affiant further declares and affirms the above statements  
to be true.

Margaret R Goss



Subscribed and sworn to before me, this 17 day of January, 1919, and I certify that the affiant is a reputable citizen, entitled to credit, and that the foregoing affidavit was read and fully explained to her before she signed the same, including the words ----- erased and the words ----- added; that the certificate of my authority to act as ----- is -----  
(Notary Public or Justice of the Peace.) (On file with the Bureau of Pensions) -----, and that I have no interest, direct or indirect, in the prosecution of this claim.

M. W. Pearson  
Notary Public of Wisconsin  
Madison, Wis.

---My Commission Expires October 8, 1922---

Under Act of Congress, approved July 1, 1890—this affidavit may be executed before a Court of Record or by a Notary Public, whose official signature must be verified by his official seal, and in case he has none, or if executed before a Justice of the Peace, his signature and official character must be certified to by a Clerk of a Court of Record, or by a City or County Clerk, unless such certificate has already been filed with the Commissioner of Pensions. When duly prepared and executed return to the Adjutant General, Madison, Wis., who prosecutes all claims for pensions—for soldiers or their heirs residing in the State, FREE OF CHARGE.

**DUPLICATE OF THIS IS REQUIRED**

This blank is not to be used except in claims in which the Adj. Gen. of Wis. appears as attorney.

**Additional Evidence**

In re ----- Wid. Orig. Pension Claim,

No. 809,379

Margaret R. Goss,

Acct of ----- Joseph Goss.

Late ----- Co. "I", 31st Reg't

Wis. Inf.

FILED BY

**THE ADJUTANT GENERAL**

OF WISCONSIN

STATE AGENT FOR PENSIONS

Attorney

Madison, Wisconsin

Forwarded FEB 3 - 1919

191



Adjutant General's Office, Wisconsin--Pension Division

PHYSICIAN'S AFFIDAVIT

In the matter of the *Widows and Orphan's Pension Claim* *Margaret R. Gadd*  
No. *809.378* account of *Joseph Gadd*  
late a *Private* (Grade) of Co. " *1* *31st* Regiment *Wis Inf*  
State of *Illinois* County of *Madison* ss.  
On this *1* day of *Feb*, A. D. 19*17*, personally appeared before me  
*Wm. B. Smith*, a respectable citizen, entitled to credit, who  
being duly sworn, says that *he* is a resident of *Black Lick*, in the County of  
*Indiana*, State of *Pa*, his post office  
address is *Black Lick Pa* and is *41* years old;  
that he is a regular practicing physician of *13* year's standing and has no interest in this claim.

AFFIANT SHOULD SIGN NAME IMMEDIATELY AFTER HIS STATEMENT

*Black Lick Pa Feb 1 1917*  
*This is to certify that*  
*attorney W. W. Gustin*  
*for legal services and he died*  
*Jan 20 1908.*  
*Wm B Smith*

FILED  
FEB 3 1917

This is to certify that *Walter D. Tuck* 1/19/19  
has been in his last illness and  
he died Jan 20 1908  
*J. M. Bushnell, M.D.*

Signature of Affiant. *J. M. Bushnell*  
(When affiant signs by mark two witnesses attest)

Subscribed and sworn to before me, this *1st* day of *February*, 1919, and I certify that he is a regular practicing physician in good professional standing, a respectable citizen, entitled to credit and that the foregoing affidavit was read and fully explained to affiant before he signed the same, including the words *—* erased and the words *—* added, that the certificate of my authority to act as *Notary Public* (Notary Public or Justice of the Peace)

[L. S.]

(On file with the Bureau of Pensions or attached hereto, as the case may be)

, and that I have no interest, direct or indirect, in the prosecution of this claim.  
*D. A. Palmer*  
(Signature)

(Official Character)

N. B. - To be executed before a Court of Record or by a Notary Public whose official signature must be verified by his official seal, and in case he has none, or if executed before a Justice of the Peace, his signature and official character must be certified to by a clerk of a Court of Record, or by a City or County Clerk, unless such certificate has already been filed with the Commissioner of Pensions.

DUPLICATE OF THIS IS REQUIRED	
This blank is not to be used except in cases where the Adjutant General of Wisconsin appears as attorney.	
Additional Evidence	
Physician's Affidavit	
In re <i>Wid. dec'd</i>	Pension Claim.
No. <i>809,379-</i>	
<i>Margaret R. Coss.</i>	
Acc't of <i>Joseph Coss</i>	
late <i>Co. " I 31st</i>	Reg't
<i>Wis. Inf't</i>	
Filed by	
THE ADJUTANT GENERAL	
of Wisconsin,	
State Agent for Pensions,	
Attorney	
Madison, Wisconsin	
FEB 6 - 1919	



# GENERAL AFFIDAVIT.

State of Wisconsin County of Fond du Lac, ss:

In the matter of Joseph Jass Paint Co. P 31 N 13  
1866

ON THIS 4 day of March, A. D. 1891, personally appeared before me, a

Justice of the Peace in and for the aforesaid County, duly authorized to administer oaths,

a Witness aged 43 years, a resident of Liberal

in the County of Fond du Lac and State of Wisconsin

whose post-office address is London Wisconsin Co 7072, and

aged \_\_\_\_\_ years, a resident of \_\_\_\_\_

in the County of \_\_\_\_\_ and State of \_\_\_\_\_

whose post-office address is \_\_\_\_\_

well known to me to be reputable and entitled to credit, and who, being duly sworn, declares each for himself, in relation to aforesaid case, as follows:

[Note.—Affiants should state how they gained a knowledge of the facts to which they testify.]

Witness threw me in leg about 7 years  
ago the wounds were covered with burns  
and scalds and I also bought  
medicine for him from Dr. J. J. Jass and  
that time for him from Dr. J. J. Jass

I further declare that I have no interest in said case, and I am  
not concerned in its prosecution.

John B. Jass



STATE OF Wisconsin COUNTY OF Manitowish

Sworn to and subscribed before me this day by the above-named affiant, and I certify that I read said affidavit to said affiant, including the words \_\_\_\_\_, erased, and the words \_\_\_\_\_, added, and acquainted him with its contents before he executed the same. I further certify that I am in no wise interested in said case, nor am I concerned in its prosecution; and that said affiant is personally known to me and that he is a creditable person.

[L. S.]

Wm. L. Laine  
[Official Signature]  
Justice of the Peace  
[Official Character]

GENERAL AFFIDAVIT.

CLAIM OF

Life \_\_\_\_\_, Co \_\_\_\_\_  
Regt. \_\_\_\_\_ Vols. \_\_\_\_\_

FOR

No. \_\_\_\_\_

FILED BY

CHARLES J. DONNELLY & CO.,

WASHINGTON, D. C.

Frank B. Jackson, Printer, 307 Pa. Ave., Wash. 200, D. C.

# GENERAL AFFIDAVIT



State of Wisconsin County of Fond du Lac, ss:

In the matter of Joseph Gass vs State, P 31<sup>st</sup> 1891

ON THIS 9<sup>th</sup> day of March, A. D. 1891, personally appeared before me, a  
Justice of the Peace in and for the aforesaid County, duly authorized to administer oaths,  
Anna Murray aged 78 years, a resident of Creola  
in the County of Fond du Lac and State of Wisconsin  
whose post-office address is Fond du Lac Co. Wis, and  
aged \_\_\_\_\_ years, a resident of \_\_\_\_\_  
in the County of \_\_\_\_\_ and State of \_\_\_\_\_  
whose post-office address is \_\_\_\_\_

well known to me to be reputable and entitled to credit, and who, being duly sworn, declares each for himself, in  
relation to aforesaid case, as follows:

[NOTE.—Affiants should state how they gained a knowledge of the facts to which they testify]

Affiant says she knows Joseph Gass for  
the last 16 years and has complained  
of pain in his side and have known him  
to spit blood on that account also her  
husband knew it to be swollen and covered  
with black spots and I also know the  
Dr. to operate on him for kidney disease.

I further declare that I have no interest in said case, and I am  
not concerned in its prosecution.

Anna Murray

Edith Gass  
(If Affiants sign by mark, two persons who can write sign here.)

Anna Murray  
mark

(Signature of Affiants.)

STATE OF Wisconsin COUNTY OF Franklin

Sworn to and subscribed before me this day by the above-named affiant, and I certify that I read said affidavit to said affiant, including the words \_\_\_\_\_ erased, and the words \_\_\_\_\_ added, and acquainted her with its contents before she executed the same. I further certify that I am in no wise interested in said case, nor am I concerned in its prosecution; and that said affiant \_\_\_\_\_ personally known to me and that she is a creditable person.

[L. S.]

Thos Caine  
[Official Signature]  
Justice of the Peace  
[Official Character]

## GENERAL AFFIDAVIT.

### CLAIM OF

\_\_\_\_\_  
\_\_\_\_\_, Co

\_\_\_\_\_  
\_\_\_\_\_ Reg. \_\_\_\_\_ Vols.

FOR

\_\_\_\_\_  
\_\_\_\_\_ No. \_\_\_\_\_

FILED BY

CHARLES J. DONNELLY & CO.,

WASHINGTON, D. C.

Frank H. Clarkson, Printer, 101 Pa. Ave., Washington, D. C.



# GENERAL AFFIDAVIT.

State of Wisconsin County of Hond du Lac, ss:

In the matter of Joseph Gass

ON THIS 14<sup>th</sup> day of March, A. D. 1892, personally appeared before me, a  
Justice of the Peace in and for the aforesaid County, duly authorized to administer oaths,  
Bohel Horn aged 35 years, a resident of Ascola  
in the County of Hond du Lac and State of Wisconsin  
whose post-office address is Dundee, and  
Alvin Gass aged 38 years, a resident of Ascola  
in the County of Hond du Lac and State of Wisconsin  
whose post-office address is Dundee  
well known to me to be reputable and entitled to credit, and who, being duly sworn, declares each for himself, in  
relation to aforesaid case, as follows:

[NOTE.—Affiants should state how they gained a knowledge of the facts to which they testify.]

I certify that Joseph Gass worked for  
me in the summer of 1890 and that he  
was complaining that he was very bad with  
the Piles and Cataract.  
I Alvin Gass do certify that I know  
Joseph Gass for a number of years and  
I have always heard him complaining  
that he was troubled with the Piles and  
also with Cataract.

Alvin further declare that they have no interest in said case, and are  
not concerned in its prosecution.

zekiel bouyer  
Amos  
[If Affiants sign by mark, two persons who can write sign here.]

[Signature of Affiants.]

STATE OF Missouri COUNTY OF Franklin

Sworn to and subscribed before me this day by the above-named affiant, and I certify that I read said affidavit to said affiant, including the words \_\_\_\_\_ erased, and the words \_\_\_\_\_ added, and acquainted him with its contents before he executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiant is personally known to me and that he is a creditable person.

[L. S.]

Thos. J. Caine  
[Official Signature.]  
Justice of the Peace  
[Official Character.]

GENERAL AFFIDAVIT.

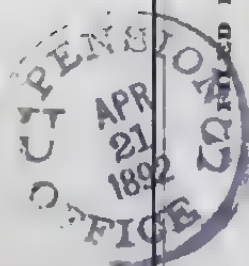
CLAIM OF

Joseph Doe

Date 31st March 1892 Vols. 1

FOR

Pension  
No. 10,000



CHARLES J. DONNELLY & CO.,

WASHINGTON, D. C.

Frank B. Clarkson, Printer, 1012 Pa. Ave., Washington, D. C.



# Adjutant General's Office, Wisconsin—Pension Division

## GENERAL AFFIDAVIT FOR ANY PURPOSE.

In the matter of the Pension Claim  
 No. 809379 account of Joseph Goss  
 late a private of Co. "D" 31 Regiment Wis. Vol. Inf.  
 State of Wisconsin County of Land du Lac ss.

On this 15<sup>th</sup> day of November, A. D. 1900, personally appeared before me  
Joseph Goss, a respectable citizen, entitled to credit, who  
 being duly sworn says that he is a resident of Campbellsport, in the County of  
Land du Lac, State of Wisconsin, his post office  
 address is Campbellsport Wis. and is 56 years old; he  
 declares that he has no interest in this claim. that I was not in the  
military or naval service of the United  
States prior to December 16<sup>th</sup> A.D. 1862  
nor subsequent to July 8<sup>th</sup> A.D. 1865  
Joseph Goss.

WITNESSES MUST STATE THEIR MEANS OF KNOWLEDGE OF FACTS TO WHICH  
 they testify, and write their names immediately after their statements, leaving no  
 blank space over their signatures.  
 When affiant signs by mark two witnesses attest.  
 Jurat and Seal of Magistrate on other side.







Subscribed and sworn to before me, this 15<sup>th</sup> day of November 1900, and I certify that the affiant is a reputable citizen, entitled to credit, and that the foregoing affidavit was read and fully explained to him before he signed the same, including the words no erased and the words added; that the certificate of my authority to act as Notary Public is on file in the Bureau of Pensions (Notary Public or Justice of the Peace.) (On file with the Bureau of Pensions or attached hereto, as the case may be.) and that I have no interest, direct or indirect in the prosecution of this claim.

John H. Pava  
(Signature.)  
Notary Public Wisc.  
(Official character.)

Under Act of Congress, approved July 1, 1890---this affidavit may be executed before a Court of Record or by a Notary Public, whose official signature must be verified by his official seal, and in case he has none, or if executed before a Justice of the Peace, his signature and official character must be certified to by a Clerk of a Court of Record, or by a City or County Clerk, unless such certificate has already been filed with the Commissioner of Pensions. When duly prepared and executed, return to The Adjutant General, Madison, Wis., who prosecutes all claims for Pensions---for soldiers or their heirs residing in the State, FREE OF CHARGE.

### Additional Evidence.

In re Luc Pension Claim.  
No. 509379  
Joseph G. ...  
Dec't of late Co. "I" 31 Reg't.  
His Inf Vols

FILED BY  
THE ADJUTANT GENERAL  
OF WISCONSIN,  
STATE AGENT FOR PENSIONS,  
ATTORNEY,  
MADISON, WISCONSIN.

Forwarded 1900.



# GENERAL AFFIDAVIT.

State of Wisconsin County of Fond du Lac, ss:

In the matter of Joseph Goes vs 31 Miss Lefty  
Original No 210401

ON THIS 30<sup>th</sup> day of December, A. D. 18 91, personally appeared before me, a

Justice of the Peace in and for the aforesaid County, duly authorized to administer oaths,  
Joseph Goes aged 47 years, a resident of Dundee  
in the County of Fond du Lac and State of Wis

whose post-office address is the same, and

aged \_\_\_\_\_ years, a resident of \_\_\_\_\_

in the County of \_\_\_\_\_ and State of \_\_\_\_\_

whose post-office address is \_\_\_\_\_

well known to me to be reputable and entitled to credit, and who, being duly sworn, declares ~~and~~ for himself, in relation to aforesaid case, as follows:

[Affiant should state from what source he gained knowledge of the facts to which he testifies.] 185  
That he is the claimant in  
the above entitled claim.  
That he contracted Contourk  
at Dundee from Cold. Contracted 1890  
while at work cutting ice  
of Piles at Dundee in the Fall of  
1882 while the first-known  
of them was after the operation performed  
the Fall of 1882 for Kidney Trouble  
He further states that they are of a  
permanent character and  
are not due to vicious habits  
of that he claims pension thereon  
under Act of June 27-1890  
of appoints Charles Donnelly Leo  
of Washington DC his attorneys.  
He further declare that he has no interest in said case, and is duly

not concerned in its prosecution.

Joseph Goes



STATE OF Wisconsin COUNTY OF Grand du Lac

Sworn to and subscribed before me this day by the above-named affiant, and I certify that I read said affidavit to said affiant, including the words \_\_\_\_\_, erased, and the words \_\_\_\_\_ added, and acquainted him with its contents before I executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiant Joseph Goss personally known to me and that he is a creditable person.

[L. S.]

Thos. Cairne  
[Official Signature.]  
Justice of the Peace  
[Official Character.]



Original  
Claim 2101401  
**GENERAL AFFIDAVIT.**

CLAIM OF

John Goss  
Late St. Paul, Co.  
Regt. Vol.  
Sw. New Law Cairne  
No. 2101401

FILED BY

**CHARLES J. DONNELLY & CO.,**

**WASHINGTON, D. C.**

Frank B. Clarkson, Printer, 1012 Pa. Ave., Washington, D. C.